# Case 17-08954 Doc 1 Filed 03/21/17 Entered 03/21/17 18:45:44 Desc Main Document Page 1 of 56

| Fill in this information to identify your case: |                                 |                                   |
|---|---------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                   |
| Case number (if known)                          | _ Chapter you are filing under: |                                   |
|   | Chapter 7                       |                                   |
|   | ☐ Chapter 11                    |                                   |
|   | ☐ Chapter 12                    |                                   |
|   | ☐ Chapter 13                    | ☐ Check if this an amended filing |

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself  |  |   |   |
|----|--|--|---|---|
|    |  | About Debtor 1:                          |   | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name   |  |   |   |
|    | Write the name that is on  | Jeffrey                                  |   |   |
|    | your government-issued picture identification (for   | First name                               | _ | First name                                    |
|    | example, your driver's   | J  |   |   |
|    | license or passport).  | Middle name                              |   | Middle name                                   |
|    | Bring your picture   | Homan                                    |   |   |
|    | identification to your meeting with the trustee.   | Last name and Suffix (Sr., Jr., II, III) |   | Last name and Suffix (Sr., Jr., II, III)      |
|    |  |  |   |   |
| ۷. | All other names you have<br>used in the last 8 years   | •  |   |   |
|    | Include your married or maiden names.  |  |   |   |
| 3. | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-1790                              |   |   |

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Case number (if known)

Debtor 1 **Jeffrey J Homan** 

|   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |  |
|---|---|---|--|--|--|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  | ☐ I have not used any business name or EINs.  Business name(s)  |  |  |  |
| doing business as names   | EINS  | EINs  |  |  |  |
| Where you live  | 200 North Drive   | If Debtor 2 lives at a different address:   |  |  |  |
|   | Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code  |  |  |  |
|   | Kane<br>County  | County  |  |  |  |
|   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.   |  |  |  |
|   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |  |  |  |
| Why you are choosing this district to file for bankruptcy   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)   |  |  |  |
|   | Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names  Where you live  Why you are choosing this district to file for   | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  Business name(s)  EINS  Where you live  200 North Drive South Elgin, IL 60177 Number, Street, City, State & ZIP Code  Kane County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Why you are choosing this district to file for bankruptcy  Why you are choosing this district to file for bankruptcy  I have another reason. |  |  |  |

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Case number (if known) Debtor 1 **Jeffrey J Homan** 

| •ar | t 2: Tell the Court About   | Your B      | ankruptcy Ca   | ise                                 |   |   |
|-----|---|-------------|----------------|-------------------------------------|---|---|
| 7.  | The chapter of the Bankruptcy Code you are  |             |                |                                     | of each, see <i>Notice Required by 1</i> f page 1 and check the appropriate | 1 U.S.C. § 342(b) for Individuals Filing for Bankruptcy box.  |
|     | choosing to file under  | ■ CI        | hapter 7       |                                     |   |   |
|     |   | □ CI        | hapter 11      |                                     |   |   |
|     |   | □ CI        | hapter 12      |                                     |   |   |
|     |   | □ CI        | hapter 13      |                                     |   |   |
|     |   |             |                |                                     |   |   |
| 3.  | How you will pay the fee  |             | about how yo   | ou may pay. Typ<br>attorney is subi | ically, if you are paying the fee you                                       | with the clerk's office in your local court for more details rself, you may pay with cash, cashier's check, or money f, your attorney may pay with a credit card or check with  |
|     |   |             |                |                                     | tallments. If you choose this options (Official Form 103A).                 | , sign and attach the Application for Individuals to Pay  |
|     |   | <del></del> | but is not req | uired to, waive                     | your fèe, and may do so only if you   | only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line e in installments). If you choose this option, you must fill |
|     |   |             |                |                                     |   | fficial Form 103B) and file it with your petition.  |
| ).  | Have you filed for bankruptcy within the last 8 years?  | ■ No        |                |                                     |   |   |
|     | idot o years.   | <b>–</b> 10 | District       |                                     | When  | Case number   |
|     |   |             | District       |                                     | When  | Case number   |
|     |   |             | District       |                                     | When  | Case number   |
|     |   |             |                |                                     |   |   |
| 10. | Are any bankruptcy cases pending or being   | ■ No        | )              |                                     |   |   |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Ye        | <b>2</b> S.    |                                     |   |   |
|     |   |             | Debtor         |                                     |   | Relationship to you   |
|     |   |             | District       |                                     | When  | Case number, if known   |
|     |   |             | Debtor         |                                     |   | Relationship to you   |
|     |   |             | District       |                                     | When  | Case number, if known   |
| 11. | Do you rent your  | ■ No        | Go to I        | ine 12.                             |   |   |
|     | residence?  | □ Ye        |                | our landlord obta                   | ained an eviction judament against  | you and do you want to stay in your residence?  |
|     |   | 6           | ,s             | No. Go to line                      | , ,   | ,   |
|     |   |             |                |                                     | itial Statement About an Eviction Ju  | udgment Against You (Form 101A) and file it with this   |
|     |   |             |                |                                     |   |   |

|     |                                      | Case 17-0   | )8954 I      | Doc 1                     | Filed 03/21/17<br>Document                              | Entered 03/21/17 18:45:44<br>Page 4 of 56   | Desc Main                           |
|-----|--------------------------------------|---|--------------|---------------------------|---|---|-------------------------------------|
| eb  | otor 1                               | Jeffrey J Homan   |              |                           |   | Case number (if known)  |                                     |
| arí | t 3: F                               | Report About Any Bus  | sinesses Yo  | ou Own as                 | a Sole Proprietor                                       |   |                                     |
| 2.  |                                      | ou a sole proprietor<br>y full- or part-time<br>ess?  | ■ No.        | Go to Pa                  | rt 4.   |   |                                     |
|     |                                      |   | ☐ Yes.       | Name ar                   | nd location of business                                 |   |                                     |
|     | busine<br>an ind<br>separa<br>as a c | e proprietorship is a<br>less you operate as<br>dividual, and is not a<br>late legal entity such<br>corporation,<br>ership, or LLC. |              | Name of                   | business, if any  |   |                                     |
|     | sole p                               | have more than one roprietorship, use a ate sheet and attach his petition.  |              |                           | Street, City, State & ZIP  se appropriate box to desi   |   |                                     |
|     |                                      | ·   |              | □ ⊦                       | lealth Care Business (as                                | defined in 11 U.S.C. § 101(27A))  |                                     |
|     |                                      |   |              |                           | ingle Asset Real Estate (                               | (as defined in 11 U.S.C. § 101(51B))  |                                     |
|     |                                      |   |              |                           | tockbroker (as defined in                               | 11 U.S.C. § 101(53A))   |                                     |
|     |                                      |   |              |                           | Commodity Broker (as def                                | fined in 11 U.S.C. § 101(6))  |                                     |
|     |                                      |   |              |                           | lone of the above                                       |   |                                     |
| 3.  | Chapt<br>Banki                       | ou filing under<br>ter 11 of the<br>ruptcy Code and are<br>small business<br>or?  | deadlines. I | If you indic<br>cash-flow | ate that you are a small l<br>statement, and federal ir | ust know whether you are a small business de<br>business debtor, you must attach your most r<br>ncome tax return or if any of these documents | ecent balance sheet, statement of   |
|     |                                      | deficition of small   | ■ No.        | I am not                  | filing under Chapter 11.                                |   |                                     |
|     | busine                               | definition of small ess debtor, see 11 . § 101(51D).  | □ No.        | I am filin<br>Code.       | g under Chapter 11, but I                               | am NOT a small business debtor according  | to the definition in the Bankruptcy |
|     |                                      |   | ☐ Yes.       | I am filin                | g under Chapter 11 and I                                | am a small business debtor according to the   | definition in the Bankruptcy Code.  |
|     |                                      |   |              |                           |   |   |                                     |

#### Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Jeffrey J Homan

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required | l to rece | ive a  | briefir | าg al | oout |
|-------------------|-----------|--------|---------|-------|------|
| credit counseling | becaus    | se of: |         |       |      |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | otor 1 <b>Jeffrey J Homan</b>                                  |                     | Documer  | TI Page 6 07 56  Case number   | Pr (if known)  |
|-----|--|---------------------|--|--|--|
| Par | t 6: Answer These Quest  | ions for R          | eporting Purposes                              |  |  |
| 16. | What kind of debts do you have?                                | 16a.                |  | nsumer debts? Consumer debts are definant, family, or household purpose."              | ned in 11 U.S.C. § 101(8) as "incurred by an                                   |
|     |  |                     | ☐ No. Go to line 16b.                          |  |  |
|     |  |                     | ■ Yes. Go to line 17.                          |  |  |
|     |  | 16b.                |  | siness debts? Business debts are debts stment or through the operation of the bus      |  |
|     |  |                     | ☐ No. Go to line 16c.                          |  |  |
|     |  |                     | ☐ Yes. Go to line 17.                          |  |  |
|     |  | 16c.                | State the type of debts you ov                 | we that are not consumer debts or busines  | ss debts   |
| 17. | Are you filing under Chapter 7?                                | □ No.               | I am not filing under Chapter 7                | 7. Go to line 18.  |  |
|     | Do you estimate that after any exempt property is excluded and | ■ Yes.              |  | o you estimate that after any exempt propwill be available to distribute to unsecured  |  |
|     | administrative expenses are paid that funds will               |                     | ■ No   |  |  |
|     | be available for distribution to unsecured creditors?          |                     | ☐ Yes  |  |  |
| 18. | How many Creditors do  | <b>1</b> -49        |  | □ 1,000-5,000  | ☐ 25,001-50,000  |
|     | you estimate that you owe?                                     | □ 50-99             | )  | □ 5001-10,000  | <b>5</b> 0,001-100,000   |
|     |  | ☐ 100-1<br>☐ 200-9  |  | □ 10,001-25,000  | ☐ More than100,000   |
| 19. | How much do you  | □ \$0 - \$          | \$50,000                                       | ☐ \$1,000,001 - \$10 million   | ☐ \$500,000,001 - \$1 billion  |
|     | estimate your assets to be worth?                              |                     | 001 - \$100,000                                | □ \$10,000,001 - \$50 million  | □ \$1,000,000,001 - \$10 billion   |
|     |  |                     | ,001 - \$500,000<br>,001 - \$1 million         | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million                         | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion                      |
| 20. | How much do you  | □ \$0 - \$          | \$50,000                                       | ☐ \$1,000,001 - \$10 million   | ☐ \$500,000,001 - \$1 billion  |
|     | estimate your liabilities to be?                               |                     | 001 - \$100,000                                | □ \$10,000,001 - \$50 million  | \$1,000,000,001 - \$10 billion   |
|     |  |                     | ,001 - \$500,000                               | ☐ \$50,000,001 - \$100 million ☐ \$100.000.001 - \$500 million                         | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion                     |
|     |  | <b>□</b> \$500      | ,001 - \$1 million                             | <b>—</b> \$100,000,001 - \$300 Hillion   | Li More than 450 billion   |
| Par | 7: Sign Below  |                     |  |  |  |
| For | you  | I have ex           | xamined this petition, and I decl              | are under penalty of perjury that the infor  | mation provided is true and correct.   |
|     |  |                     |  | I am aware that I may proceed, if eligible lief available under each chapter, and I cl | , under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7. |
|     |  |                     |  | ot pay or agree to pay someone who is not notice required by 11 U.S.C. § 342(b).       | ot an attorney to help me fill out this  |
|     |  | I reques            | t relief in accordance with the ch             | hapter of title 11, United States Code, spe  | ecified in this petition.  |
|     |  | bankrup<br>1519, ar | tcy case can result in fines up to<br>ad 3571. | concealing property, or obtaining money of \$250,000, or imprisonment for up to 20     |  |
|     |  |                     | rey J Homan<br>J Homan                         | Signature of Debto   | r 2  |
|     |  |                     | e of Debtor 1                                  | •  |  |
|     |  | Execute             |  | Executed on  |  |
|     |  |                     | MM / DD / YYYY                                 | MM   | / DD / YYYY  |

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Debtor 1 Jeffrey J Homan Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David Cutler                       | Date          | March 21, 2017      |
|--|---------------|---------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY      |
| David Cutler Printed name              |               |                     |
| Cutler & Associates, Ltd               |               |                     |
| 4131 Main Street<br>Skokie, IL 60076   |               |                     |
| Number, Street, City, State & ZIP Code |               |                     |
| Contact phone <b>847-673-8600</b>      | Email address | david@cutlerltd.com |
| Bar number & State                     |               |                     |

|   |                         | Docume            | ent Page 8 of 56 |  |
|---|-------------------------|-------------------|------------------|--|
| Fill in this infor                      | mation to identify your | case:             |                  |  |
| Debtor 1                                | Jeffrey J Homan         |                   |                  |  |
|   | First Name              | Middle Name       | Last Name        |  |
| Debtor 2                                |                         |                   |                  |  |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name        |  |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS      |  |
| Case number                             |                         |                   |                  |  |

☐ Check if this is an amended filing

### Official Form 106Sum

(if known)

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Pa | t 1: Summarize Your Assets   |            |                           |
|----|--|------------|---------------------------|
|    |  | Your a     | assets<br>of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$         | 140,000.00                |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$         | 21,400.00                 |
|    | 1c. Copy line 63, Total of all property on Schedule A/B  | \$         | 161,400.00                |
| Pa | t 2: Summarize Your Liabilities  |            |                           |
|    |  |            | iabilities<br>nt you owe  |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$         | 160,775.00                |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$         | 0.00                      |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$         | 39,704.00                 |
|    | Your total liabilities   | \$         | 200,479.00                |
| Pa | t 3: Summarize Your Income and Expenses  |            |                           |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$         | 2,892.00                  |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$         | 2,816.00                  |
| Pa | t 4: Answer These Questions for Administrative and Statistical Records   |            |                           |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other s | chedules.                 |
| 7. | ■ Yes What kind of debt do you have?   |            |                           |
|    | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for   | a persona  | ıl, family, or            |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

4,522.33 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following:   | Total cl | aim  |
|--|----------|------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$       | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$       | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$       | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$       | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$       | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$      | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$       | 0.00 |

| C                   | ase 17-00954                | Docume Docume  |  | 6                           | Desci          | viaiii                             |
|---------------------|-----------------------------|--|--|-----------------------------|----------------|------------------------------------|
| Fill in this infor  | mation to identify your     | case and this filing:  |  |                             |                |                                    |
| Debtor 1            | Jeffrey J Homan             |  |  |                             |                |                                    |
| Debtor 2            | First Name                  | Middle Name  | Last Name  |                             |                |                                    |
| (Spouse, if filing) | First Name                  | Middle Name  | Last Name  |                             |                |                                    |
| United States Ba    | ankruptcy Court for the:    | NORTHERN DISTRICT (  | OF ILLINOIS  |                             |                |                                    |
| Case number         |                             |  |  |                             |                | Check if this is an amended filing |
| In each category, s | complete and accurate as    | e items. List an asset only one<br>possible. If two married people | ce. If an asset fits in more than<br>le are filing together, both are e<br>any additional pages, write you | equally responsible for sup | pplying corre  | ct information. If                 |
| Part 1: Describe    | Each Residence, Building    | , Land, or Other Real Estate \                                     | You Own or Have an Interest In   | ı                           |                |                                    |
| 1. Do you own or l  | have any legal or equitable | interest in any residence, bu                                      | ilding, land, or similar property  | y?                          |                |                                    |
| ☐ No. Go to Pa      | rt 2.                       |  |  |                             |                |                                    |
| Yes. Where          | is the property?            |  |  |                             |                |                                    |
|                     |                             |  |  |                             |                |                                    |
| 1.1                 |                             | What is the p  | property? Check all that apply   |                             |                |                                    |
| 200 North           | n Drive                     | Single   | e-family home  | Do not deduct sec           | cured claims o | r exemptions. Put the              |

| 1 |   |       |   | What          | t is the property? Check all that apply   |     |                                  |  |
|---|---|-------|---|---------------|---|-----|----------------------------------|--|
|   | 200 North Drive  Street address, if available, or other description |       | Single-family home  Duplex or multi-unit building  Condominium or cooperative |               | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.                                    |     |                                  |  |
| - | South Elgin   | IL    | 60177-0000  |               |   |     | rrent value of the ire property? | Current value of the portion you own?                          |
|   | City  | State | ZIP Code  | □<br>□<br>Who | Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only  | (su |                                  | \$140,000.00 our ownership interest ancy by the entireties, or |
|   | Kane  |       |   |               | Debtor 2 only   |     |                                  |  |
| - | County  |       |   | prop          | Debtor 1 and Debtor 2 only  At least one of the debtors and another r information you wish to add about this ite erty identification number:  Le per Redfin \$153,394 3/8/17 less | •   |                                  | nmunity property   |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$140,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Deb         | tor 1 <b>_J</b> | effrey J Homan   | l                              | Document Pag  | e 11 01 56<br>Case i    | number (if known)        |   |
|-------------|-----------------|--|--------------------------------|---|-------------------------|--------------------------|---|
| 3. <b>C</b> | ars, vans,      | , trucks, tractors,  | sport utility ve               | hicles, motorcycles                                       |                         |                          |   |
|             | No              |  |                                |   |                         |                          |   |
|             | Yes             |  |                                |   |                         |                          |   |
| 3.1         | Make:           | Caddilac   |                                | Who has an interest in the proper                         | tu2 Chaek ana           | Do not deduct secured of | laims or exemptions. Put  |
| 3.1         | Model:          | Escalade   |                                | Who has an interest in the propert  Debtor 1 only         | ty? Check one           |                          | ed claims on Schedule D:<br>nims Secured by Property.                             |
|             | Year:           | 2010   |                                | Debtor 2 only   |                         | Current value of the     | Current value of the  |
|             | Approxin        | nate mileage:  | 112000                         | Debtor 1 and Debtor 2 only                                |                         | entire property?         | portion you own?  |
|             | Other inf       | formation:   |                                | At least one of the debtors and a                         | nother                  |                          |   |
|             |                 |  |                                | Check if this is community pro (see instructions)         | pperty                  | \$18,000.00              | \$18,000.00   |
| 5 A         |                 |  |                                | n for all of your entries from Pa<br>that number here     |                         |                          | \$18,000.00   |
|             |                 |  |                                |   |                         |                          |   |
|             | ou own o        | be Your Personal ar<br>or have any legal<br>goods and furnis | or equitable in                | ns<br>erest in any of the following ite                   | ems?                    |                          | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| E           | xamples:<br>No  |  |                                | china, kitchenware  |                         |                          |   |
|             |                 |  | rsonal posse<br>int with non f | ssions in 640 square foot ho<br>iling spouse)             | ome at liquidation      | value                    | \$500.00  |
| E           |                 | Televisions and ra<br>including cell phor                    |                                | eo, stereo, and digital equipment;<br>edia players, games | computers, printers,    | scanners; music collec   | ctions; electronic devices  |
| E           | xamples:        | other collections,   |                                | prints, or other artwork; books, pid<br>lectibles         | ctures, or other art ob | jects; stamp, coin, or t | paseball card collections;  |
| E           | xamples:        | for sports and he<br>Sports, photograp<br>musical instrumer  | hic, exercise, an              | d other hobby equipment; bicycle:                         | s, pool tables, golf cl | ubs, skis; canoes and    | kayaks; carpentry tools;  |
|             | No<br>Yes. De   | escribe  |                                |   |                         |                          |   |
| _           | l No            | :: Pistols, rifles, she                                      | otguns, ammuni                 | tion, and related equipment                               |                         |                          |   |

Official Form 106A/B Schedule A/B: Property page 2

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| Debtor 1      | Jeffrey J Ho                          | oman  | Case numbe  | r (if known)  |
|---------------|---------------------------------------|---|---|---|
|               |                                       | Handgun   |   | \$500.00  |
| ☐ No          |                                       | lothes, furs, leather coats, desi                 | gner wear, shoes, accessories   |   |
|               |                                       | Personal clothing                                 |   | \$400.00  |
| □ No          |                                       | ewelry, costume jewelry, engag                    | ement rings, wedding rings, heirloom jewelry, watch   | es, gems, gold, silver  |
|               |                                       | Wedding ring                                      |   | \$10.00   |
| Exam<br>□ No  | arm animals ples: Dogs, cats Describe | , birds, horses                                   |   |   |
|               |                                       | Dog   |   | \$0.00  |
| 15. Add for P | art 3. Write that                     | e of all of your entries from Pa<br>t number here | art 3, including any entries for pages you have at  | \$1,410.00  |
| Do you o      | wn or have any                        | legal or equitable interest in                    | any of the following?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No          |                                       | have in your wallet, in your ho                   | me, in a safe deposit box, and on hand when you file  | e your petition   |
|               |                                       |   | Cash  | \$200.00  |
|               |                                       |   | unts; certificates of deposit; shares in credit unions, with the same institution, list each. | brokerage houses, and other similar   |
|               |                                       |   | Institution name:   |   |
|               |                                       | 17.1. Checking                                    | Chase Bank  | \$290.00  |
|               |                                       |   |   |   |

**Chase Bank** 

Official Form 106A/B Schedule A/B: Property

17.2. Checking

\$0.00

Case 17-08954 Doc 1 Filed 03/21/17 Entered 03/21/17 18:45:44 Desc Main Document Page 13 of 56 Case number (if known) Debtor 1 Jeffrey J Homan 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Institution name: Type of account: **Pension** Union pension \$0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

| D  | ebtor 1 <b>Jeffrey J Homan</b>  | Document                   | Page 14 of 56 Case number (if known)  |  |
|----|---|----------------------------|---|--|
|    |   |                            |   |  |
| 28 | Tax refunds owed to you  ■ No   |                            |   |  |
|    | Yes. Give specific information about them, inc  | cluding whether you alre   | eady filed the returns and the tax years  |  |
|    |   |                            |   |  |
| 29 | Family support  Examples: Past due or lump sum alimony, spot  ■ No  | usal support, child supp   | port, maintenance, divorce settlement, propert  | y settlement   |
|    | ☐ Yes. Give specific information  |                            |   |  |
| 30 | Other amounts someone owes you  Examples: Unpaid wages, disability insurance p benefits; unpaid loans you made to   |                            | nefits, sick pay, vacation pay, workers' compe  | ensation, Social Security  |
|    | ☐ Yes. Give specific information  |                            |   |  |
| 31 | Interests in insurance policies  Examples: Health, disability, or life insurance; h ■ No  | nealth savings account     | (HSA); credit, homeowner's, or renter's insura  | ance   |
|    | ☐ Yes. Name the insurance company of each por Company name:   | olicy and list its value.  | Beneficiary:  | Surrender or refund value:   |
|    | <ul> <li>Any interest in property that is due you from If you are the beneficiary of a living trust, expect someone has died.</li> <li>■ No</li> <li>□ Yes. Give specific information</li> <li>Claims against third parties, whether or not yexamples: Accidents, employment disputes, inserting the property of the proper</li></ul> | et proceeds from a life in | nsurance policy, or are currently entitled to recurrently entitled to recurre | ceive property because   |
|    | ■ No  Yes. Describe each claim  | surance claims, or right   | is to sue   |  |
| 34 | Other contingent and unliquidated claims of   | every nature, includi      | ng counterclaims of the debtor and rights t   | o set off claims   |
|    | ■ No □ Yes. Describe each claim   |                            |   |  |
| 35 | Any financial assets you did not already list   |                            |   |  |
|    | ■ No □ Yes. Give specific information   |                            |   |  |
| 36 | 6. Add the dollar value of all of your entries fro for Part 4. Write that number here   |                            |   | \$490.00   |
| Pa | art 5: Describe Any Business-Related Property You O   | Own or Have an Interest I  | n. List anv real estate in Part 1.  |  |
|    |   |                            |   |  |
|    | Do you own or have any legal or equitable interest in  ☐ No. Go to Part 6. —  | any business-related pro   | operty?   |  |
|    | Yes. Go to line 38.   |                            |   |  |
|    |   |                            |   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 38 | Accounts receivable or commissions you alr  | eady earned                |   |  |
|    | ■ No  No Describe   |                            |   |  |

|                     | Case 17-08954 Doc 1  | Filed 03/21/17<br>Document      | Page 15 of 56                       |                            | ain           |
|---------------------|--|---------------------------------|-------------------------------------|----------------------------|---------------|
| Debtor 1            | Jeffrey J Homan  |                                 | Case number                         | r (if known)               |               |
| <i>Exar</i><br>■ No | e equipment, furnishings, and supplie mples: Business-related computers, software          | es<br>ware, modems, printers, o | copiers, fax machines, rugs, teleph | ones, desks, chairs, elect | ronic devices |
|                     |  |                                 |                                     |                            |               |
| □ No                | ninery, fixtures, equipment, supplies y  | ou use in business, and         | I tools of your trade               |                            |               |
| ■ Yes               | s. Describe  |                                 |                                     |                            |               |
|                     | Tools for genera   | l construction                  |                                     | ]                          | \$1,500.0     |
| 44 - 1              | dam.   |                                 |                                     |                            |               |
| 41. Inver ■ No      | itory  |                                 |                                     |                            |               |
|                     | s. Describe  |                                 |                                     |                            |               |
|                     |  |                                 |                                     |                            |               |
|                     | ests in partnerships or joint ventures   |                                 |                                     |                            |               |
| ■ No                | 0  |                                 |                                     |                            |               |
| ⊔ Ye                | s. Give specific information about them.  Name of entity:                                  |                                 | % of owner                          | ship:                      |               |
| _                   |  |                                 |                                     |                            |               |
| 43. <b>Cust</b> No. | omer lists, mailing lists, or other com  | pilations                       |                                     |                            |               |
|                     | our lists include personally identifiable info   | rmation (as defined in 11 IIS   | S.C. 8 101(41A)\2                   |                            |               |
| _ 50 ,              | our lists morade personally identifiable fine  | mation (as defined in 11 o.c    | .o. g 101(+111)):                   |                            |               |
|                     | ■ No   |                                 |                                     |                            |               |
|                     | ☐ Yes. Describe  |                                 |                                     |                            |               |
| 44 <b>A</b> ny I    | ousiness-related property you did not  | alroady list                    |                                     |                            |               |
| 44. Ally I          | business-related property you did not  | already list                    |                                     |                            |               |
|                     | s. Give specific information   |                                 |                                     |                            |               |
|                     |  |                                 |                                     |                            |               |
|                     | I the dollar value of all of your entries<br>Part 5. Write that number here                |                                 |                                     |                            | \$1,500.00    |
|                     | Describe Any Farm- and Commercial Fishing you own or have an interest in farmland, list it |                                 | n or Have an Interest In.           |                            |               |
| 46. <b>Do v</b> e   | ou own or have any legal or equitable  | interest in any farm- or        | commercial fishing-related prop     | ertv?                      |               |
|                     | o. Go to Part 7.   | <b>,</b>                        |                                     |                            |               |
| ☐ Y                 | es. Go to line 47.   |                                 |                                     |                            |               |
| Part 7:             | Describe All Property You Own or Have  | an Interest in That You Did     | Not List Above                      |                            |               |
|                     | ou have other property of any kind you nples: Season tickets, country club mem             |                                 |                                     |                            |               |
| ■ No                |  | •                               |                                     |                            |               |
| ☐ Yes               | s. Give specific information   |                                 |                                     |                            |               |

Official Form 106A/B Schedule A/B: Property page 6

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

\$0.00

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Case number (if known)

Document Debtor 1 Jeffrey J Homan

| Part | 8: List the Totals of Each Part of this Form                 |             |                              |              |
|------|--|-------------|------------------------------|--------------|
| 55.  | Part 1: Total real estate, line 2                            |             |                              | \$140,000.00 |
| 56.  | Part 2: Total vehicles, line 5                               | \$18,000.00 |                              |              |
| 57.  | Part 3: Total personal and household items, line 15          | \$1,410.00  |                              |              |
| 58.  | Part 4: Total financial assets, line 36                      | \$490.00    |                              |              |
| 59.  | Part 5: Total business-related property, line 45             | \$1,500.00  |                              |              |
| 60.  | Part 6: Total farm- and fishing-related property, line 52    | \$0.00      |                              |              |
| 61.  | Part 7: Total other property not listed, line 54 +           | \$0.00      |                              |              |
| 62.  | Total personal property. Add lines 56 through 61             | \$21,400.00 | Copy personal property total | \$21,400.00  |
| 63.  | Total of all property on Schedule A/B. Add line 55 + line 62 |             |                              | \$161,400.00 |
|      |  |             |                              |              |

Official Form 106A/B Schedule A/B: Property page 7

|                     |                          |                   | III FAUC 17 OLDU |  |
|---------------------|--------------------------|-------------------|------------------|--|
| Fill in this infor  | mation to identify your  | case:             |                  |  |
| Debtor 1            | Jeffrey J Homan          |                   |                  |  |
|                     | First Name               | Middle Name       | Last Name        |  |
| Debtor 2            |                          |                   |                  |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name        |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |  |
| Case number         |                          |                   |                  |  |
| (if known)          |                          |                   |                  |  |
|                     |                          |                   |                  |  |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the Pro | perty Y | 'ou Claim | as Exempt |
|---------|----------|---------|---------|-----------|-----------|
|---------|----------|---------|---------|-----------|-----------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- For any property you list on Schedule A/B that you claim as exempt, fill in the information below.
   Brief description of the property and line on Current value of the Amount of the exemption you claim

| Schedule A/B that lists this property   | portion you own   |  |   |                       |
|---|---|--|---|-----------------------|
|   | Copy the value from Check only one box for each exemption. Schedule A/B |  |   |                       |
| 200 North Drive South Elgin, IL 60177<br>Kane County                            | \$140,000.00  |  | \$7,000.00  | 735 ILCS 5/12-901     |
| Value per Redfin \$153,394 3/8/17 less cost of sale Line from Schedule A/B: 1.1 |   |  | 100% of fair market value, up to any applicable statutory limit |                       |
| Personal possessions in 640 square foot home at liquidation value (joint        | \$500.00  |  | \$500.00  | 735 ILCS 5/12-1001(b) |
| with non filing spouse) Line from Schedule A/B: 6.1                             |   |  | 100% of fair market value, up to any applicable statutory limit |                       |
| Handgun Line from Schedule A/B: 10.1  | \$500.00  |  | \$500.00  | 735 ILCS 5/12-1001(b) |
| Line IIIIII Schedule AVD. 10.1  |   |  | 100% of fair market value, up to any applicable statutory limit |                       |
| Personal clothing Line from Schedule A/B: 11.1                                  | \$400.00  |  | \$400.00  | 735 ILCS 5/12-1001(a) |
| Line non Schedule Add. 1111   |   |  | 100% of fair market value, up to any applicable statutory limit |                       |
| Wedding ring Line from Schedule A/B: 12.1                                       | \$10.00   |  | \$10.00   | 735 ILCS 5/12-1001(b) |
| Line Irom Schedule AVB: 12.1  |   |  | 100% of fair market value, up to any applicable statutory limit |                       |

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| eptor 1 Jettrey J Homan  |  |   | Case number (if known)   |   |  |
|--|--|---|--|---|--|
| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own   | Amo   | ount of the exemption you claim  | Specific laws that allow exemption  |  |
|  | Copy the value from<br>Schedule A/B  | Che   | ck only one box for each exemption.  |   |  |
| Cash Line from Schedule A/B: 16.1  | \$200.00   |   | \$200.00   | 735 ILCS 5/12-1001(b)   |  |
| Line from Governo V.B. 1911  |  |   | 100% of fair market value, up to any applicable statutory limit  |   |  |
| Checking: Chase Bank   | \$290.00   |   | \$290.00   | 735 ILCS 5/12-1001(b)   |  |
| Line IIom Schedule A/B. 1111   |  |   | 100% of fair market value, up to any applicable statutory limit  |   |  |
| Pension: Union pension   | \$0.00   |   | \$0.00   | 735 ILCS 5/12-1006  |  |
| Line IIom Schedule A.B. 2111   |  |   | 100% of fair market value, up to any applicable statutory limit  |   |  |
| Tools for general construction   | \$1,500.00   |   | \$1,500.00   | 735 ILCS 5/12-1001(d)   |  |
| Line Horri Schedule A.B. 40.1  |  |   | 100% of fair market value, up to any applicable statutory limit  |   |  |
|  |  |   | iled on or after the date of adjustme  | nt.)  |  |
| ■ No   |  |   |  |   |  |
| ☐ Yes. Did you acquire the property cover  | red by the exemption w   | ithin 1   | ,215 days before you filed this case   | ?   |  |
| □ No   |  |   |  |   |  |
|  | Brief description of the property and line on Schedule A/B that lists this property  Cash Line from Schedule A/B: 16.1  Checking: Chase Bank Line from Schedule A/B: 17.1  Pension: Union pension Line from Schedule A/B: 21.1  Tools for general construction Line from Schedule A/B: 40.1  Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  No  Yes. Did you acquire the property cover | Brief description of the property and line on Schedule A/B that lists this property  Cash Line from Schedule A/B: 16.1  Checking: Chase Bank Line from Schedule A/B: 17.1  Checking: Chase Bank Line from Schedule A/B: 17.1  Pension: Union pension Line from Schedule A/B: 21.1  Tools for general construction Line from Schedule A/B: 40.1  Are you claiming a homestead exemption of more than \$160,37 (Subject to adjustment on 4/01/19 and every 3 years after that for color of the portion you own Copy the value from Schedule A/B: 17.1  \$200.00 | Brief description of the property and line on Schedule A/B that lists this property  Cash Line from Schedule A/B: 16.1  Checking: Chase Bank Line from Schedule A/B: 17.1  Checking: Chase Bank Line from Schedule A/B: 17.1  Pension: Union pension Line from Schedule A/B: 21.1  Tools for general construction Line from Schedule A/B: 40.1  Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases file No  Yes. Did you acquire the property covered by the exemption within 1 | Brief description of the property and line on Schedule A/B that lists this property  Cash Line from Schedule A/B: 16.1  Checking: Chase Bank Line from Schedule A/B: 17.1  Check only one box for each exemption.  Check only one one in 100% of |  |

☐ Yes

|   | Document   | Page 19                 | <u>01 56</u>                           |                          |                   |
|---|--|-------------------------|--|--------------------------|-------------------|
| Fill in this information to identify        | your case:   |                         |  |                          |                   |
| Debtor 1 Jeffrey J Ho                       | man  |                         |  |                          |                   |
| First Name                                  | Middle Name  | Last Name               |  | -                        |                   |
| Debtor 2                                    |  |                         |  | -                        |                   |
| (Spouse if, filing) First Name              | Middle Name  | Last Name               |  |                          |                   |
| United States Bankruptcy Court for          | r the: NORTHERN DISTRICT OF  | ILLINOIS                |  |                          |                   |
| Coop number                                 |  |                         |  |                          |                   |
| Case number                                 | <del></del> -  |                         |  | □ Check                  | if this is an     |
|   |  |                         |  | _                        | led filing        |
|   |  |                         |  |                          | ū                 |
| Official Form 106D                          |  |                         |  |                          |                   |
| Schedule D: Credito                         | ors Who Have Claim   | s Secured               | by Propert                             | V                        | 12/15             |
|   |  |                         | <u> </u>                               | <u> </u>                 |                   |
|   | ble. If two married people are filing toge<br>t out, number the entries, and attach it t |                         |  |                          |                   |
| known).                                     |  |                         |  |                          | •                 |
| 1. Do any creditors have claims secure      | ed by your property?   |                         |  |                          |                   |
| ☐ No. Check this box and sub                | mit this form to the court with your of  | ther schedules. Yo      | u have nothing else                    | to report on this form.  |                   |
| Yes. Fill in all of the informa             | ition below.   |                         |  |                          |                   |
| Part 1: List All Secured Claims             | s  |                         |  |                          |                   |
| 2. List all secured claims. If a creditor h | has more than one secured claim, list the  | creditor separately for | Column A                               | Column B                 | Column C          |
| each claim. If more than one creditor ha    | as a particular claim, list the other creditors  |                         | Amount of claim                        | Value of collateral      | Unsecured         |
| as possible, list the claims in alphabetica | al order according to the creditor's name.   |                         | Do not deduct the value of collateral. | that supports this claim | portion<br>If any |
| 2.1 Ally Financial                          | Describe the property that secure  | es the claim:           | \$27,775.00                            | Unknown                  | \$27,775.00       |
| Creditor's Name                             | Automobile   |                         |  |                          |                   |
|   |  |                         |  |                          |                   |
| Do Doy 200004                               | As of the date you file, the claim   | is: Check all that      |  |                          |                   |
| Po Box 380901<br>Bloomington, MN 55438      | apply.   |                         |  |                          |                   |
|   |  |                         |  |                          |                   |
| Number, Street, City, State & Zip Code      | Unliquidated ☐ Disputed  |                         |  |                          |                   |
| Who owes the debt? Check one.               | Nature of lien. Check all that app   | olv.                    |  |                          |                   |
| ■ Debtor 1 only                             | ☐ An agreement you made (such  | •                       | ed                                     |                          |                   |
| Debtor 2 only                               | car loan)  |                         |  |                          |                   |
| Debtor 1 and Debtor 2 only                  | ☐ Statutory lien (such as tax lien,  | mechanic's lien)        |  |                          |                   |
| ☐ At least one of the debtors and anoth     | _ ' '  | moonamo o nom           |  |                          |                   |
| ☐ Check if this claim relates to a          | ☐ Other (including a right to offset   | t)                      |  |                          |                   |
| community debt                              | , , ,  |                         |  |                          |                   |
| Opened                                      |  |                         |  |                          |                   |
| 09/15 La                                    | est  |                         |  |                          |                   |
| Active                                      |  |                         |  |                          |                   |
| Date debt was incurred 2/15/17              | Last 4 digits of account nu  | umber 5926              |  |                          |                   |
|   |  |                         |  |                          |                   |
| 2.2 Ruth Kinast                             | Describe the property that secure  | es the claim:           | \$133,000.00                           | \$140,000.00             | \$0.00            |
| Creditor's Name                             | 200 North Drive South El   | gin, IL                 |  |                          |                   |
|   | 60177 Kane County  | 4 2/0/47                |  |                          |                   |
|   | Value per Redfin \$153,39  | 4 3/8/17                |  |                          |                   |
| ACM2CO Himming Dd                           | As of the date you file, the claim   | is: Check all that      |  |                          |                   |
| 46W360 Higgins Rd<br>South Elgin, IL 60177  | apply.   |                         |  |                          |                   |
| Number, Street, City, State & Zip Code      | Contingent   |                         |  |                          |                   |
| rumber, Street, Oity, State & Zip Code      | Unliquidated ☐ Disputed  |                         |  |                          |                   |
| Who owes the debt? Check one.               | Nature of lien. Check all that app   | oly.                    |  |                          |                   |
| ■ Debtor 1 only                             | ☐ An agreement you made (such  | •                       | ed                                     |                          |                   |
| Debtor 2 only                               | car loan)  | 2 0                     |  |                          |                   |
| Debtor 1 and Debtor 2 only                  | ☐ Statutory lien (such as tax lien,  | mechanic's lien)        |  |                          |                   |
| ☐ At least one of the debtors and anoth     |  | ,                       |  |                          |                   |

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| Debtor 1  | Jeffrey J Homan                             |                        |                                  | Case number (if know) |  |
|-----------|---|------------------------|----------------------------------|-----------------------|--|
|           | First Name                                  | Middle Name            | Last Name                        | _                     |  |
|           | if this claim relates to a unity debt       | ☐ Other (in            | ncluding a right to offset)      |                       |  |
| Date debt | Date debt was incurred                      |                        | 4 digits of account number       |                       |  |
|           |   |                        |                                  |                       |  |
| Add the   | dollar value of your ent                    | ries in Column A on tl | nis page. Write that number here | \$160,775.00          |  |
|           | the last page of your fo<br>at number here: | rm, add the dollar val | ue totals from all pages.        | \$160,775.00          |  |

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|                                  | Case 17-00954 DOC :   |   | age 21 of           | 15/21/17 10:45<br>f 56     | 7.44 Des           | oc mani                  |
|----------------------------------|---|---|---------------------|----------------------------|--------------------|--------------------------|
| Fill in t                        | his information to identify your case:  |   |                     |                            | 1                  |                          |
| Debtor                           | 1 Jeffrey J Homan   |   |                     |                            | •                  |                          |
| Dobioi                           | First Name  | Middle Name Las   | st Name             |                            |                    |                          |
| Debtor                           | 2   |   |                     |                            |                    |                          |
| (Spouse i                        | f, filing) First Name   | Middle Name Las   | st Name             |                            |                    |                          |
| United                           | States Bankruptcy Court for the: NOF  | RTHERN DISTRICT OF ILLINO   | IS                  |                            |                    |                          |
| Case n                           | umber   |   |                     |                            |                    |                          |
| (if known)                       |   |   |                     |                            |                    | heck if this is an       |
|                                  |   |   |                     |                            | a                  | mended filing            |
| Offici                           | al Form 106E/F  |   |                     |                            |                    |                          |
|                                  | dule E/F: Creditors Who   | Have Uncocured Cl   | aime                |                            |                    | 12/15                    |
|                                  | mplete and accurate as possible. Use Part 1   |   |                     |                            |                    |                          |
| D: Credit<br>he Cont<br>number ( | e G: Executory Contracts and Unexpired Lea<br>tors Who Have Claims Secured by Property.<br>inuation Page to this page. If you have no in<br>(if known). | . If more space is needed, copy the formation to report in a Part, do n | e Part you need     | d, fill it out, number the | entries in the b   | oxes on the left. Attach |
| Part 1:                          |   |   |                     |                            |                    |                          |
| 1. Do                            | any creditors have priority unsecured claims  | s against you?  |                     |                            |                    |                          |
|                                  | No. Go to Part 2.   |   |                     |                            |                    |                          |
|                                  | Yes.  |   |                     |                            |                    |                          |
| Part 2:                          | List All of Your NONPRIORITY Uns  | secured Claims  |                     |                            |                    |                          |
|                                  | any creditors have nonpriority unsecured cl No. You have nothing to report in this part. Sub Yes.   |   | ther schedules.     |                            |                    |                          |
| clair                            | all of your nonpriority unsecured claims in m, list the creditor separately for each claim. For altitude a particular claim, list the other credition.  | or each claim listed, identify what typ                                 | e of claim it is. I | Do not list claims already | y included in Part | 1. If more than one      |
| 4.1                              | Amer Gen Fin  | Last 4 digits of account i  | number 02           | 07                         |                    | \$0.00                   |
|                                  | Nonpriority Creditor's Name   |   | _                   |                            |                    |                          |
|                                  | Springleaf Financial/Attn: Bankruptcy De  | When was the debt incur   |                     | oened 5/11/10 La<br>04/11  | St Active          |                          |
|                                  | Po Box 3251   | When was the debt mou   | 1/0                 | 7-7/11                     |                    | -                        |
|                                  | Evansville, IN 47731  |   |                     |                            |                    |                          |
|                                  | Number Street City State Zlp Code   | As of the date you file, the  | ne claim is: Che    | eck all that apply         |                    |                          |
|                                  | Who incurred the debt? Check one.   | ☐ Contingent  |                     |                            |                    |                          |
|                                  | Debtor 1 only   | ☐ Unliquidated  |                     |                            |                    |                          |
|                                  | ☐ Debtor 2 only   | □ Disputed  |                     |                            |                    |                          |
|                                  | ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY u   | nsecured clain      | n:                         |                    |                          |
|                                  | ☐ At least one of the debtors and another   | ☐ Student loans   |                     |                            |                    |                          |
|                                  | ☐ Check if this claim is for a community of the claim subject to offset?  | debt  | of a separation     | agreement or divorce th    | at you did not     |                          |
|                                  | ■ No  | ☐ Debts to pension or pro   | ofit-sharing plan   | s, and other similar debi  | iS                 |                          |
|                                  | Yes   | Other Specify Auto  | omobile             |                            |                    |                          |

Document Page 22 of 56 Debtor 1 Jeffrey J Homan Case number (if know) Belden Jewelers/Sterling Jewelers, 3554 \$0.00 4.2 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/13 Last Active Po Box 1799 When was the debt incurred? 8/08/14 Akron, OH 44309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.3 Capital One Last 4 digits of account number 4463 \$0.00 Nonpriority Creditor's Name Attn: General Opened 03/16 Last Active Correspondence/Bankruptcy When was the debt incurred? 02/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.4 **Capital One** Last 4 digits of account number 8964 \$0.00 Nonpriority Creditor's Name Attn: General Opened 07/10 Last Active Correspondence/Bankruptcy When was the debt incurred? 7/31/14 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed

☐ Yes

■ No

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

■ Other. Specify Credit Card

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

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Debtor 1 Jeffrey J Homan Case number (if know) 4.5 Chase Card Last 4 digits of account number 9179 \$7,198.00 Nonpriority Creditor's Name Opened 10/14 Last Active Po Box 15298 When was the debt incurred? 12/02/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.6 **Chase Card** Last 4 digits of account number 6969 \$4,673.00 Nonpriority Creditor's Name Opened 04/16 Last Active Po Box 15298 When was the debt incurred? 2/17/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.7 **Discover Financial** \$8,334.00 Last 4 digits of account number 4627 Nonpriority Creditor's Name Opened 1/20/12 Last Active Po Box 3025 When was the debt incurred? 12/07/16 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit Card

Document Page 24 of 56 Debtor 1 Jeffrey J Homan Case number (if know) 4.8 Hsbc Bank Usa, Na Last 4 digits of account number 0519 \$0.00 Nonpriority Creditor's Name Opened 12/20/06 Last Active Po Box 2013 When was the debt incurred? 10/16/11 Buffalo, NY 14240 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes \$18,271.00 4.9 **Lending Club Corp** Last 4 digits of account number 2704 Nonpriority Creditor's Name 71 Stevenson St Opened 1/21/16 Last Active Suite 300 When was the debt incurred? 11/22/16 San Francisco, CA 94105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ■ Other. Specify Unsecured 4.10 **Northwest Collectors** Last 4 digits of account number 7644 \$414.00 Nonpriority Creditor's Name **Opened 10/16** 3601 Algonquin Rd Ste 232 When was the debt incurred? Rolling Meadows, IL 60008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

Official Form 106 E/F

■ No

☐ Yes

report as priority claims

■ Other. Specify Consultan

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

Collection Attorney Associated Pathology

Is the claim subject to offset?

| Dobto |   | -lied 03/21/17 Entero<br>Document Page 2                     | ed 03/21/17 18:45:44 Desc M<br>5 of 56        | iain     |
|-------|---|--|---|----------|
| 4.11  | r 1 Jeffrey J Homan  Personal Finance/p312  Nonpriority Creditor's Name       | Last 4 digits of account number                              | Case number (if know)  8101                   | \$814.00 |
|       | 1022 S. Mclean Blvd<br>Elgin, IL 60123  | When was the debt incurred?                                  | Opened 02/15 Last Active 2/03/17              |          |
|       | Number Street City State Zlp Code   | As of the date you file, the claim i                         | s: Check all that apply                       |          |
|       | Who incurred the debt? Check one.   | ☐ Contingent   |   |          |
|       | ■ Debtor 1 only   | ☐ Unliquidated   |   |          |
|       | Debtor 2 only   | ☐ Disputed   |   |          |
|       | Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | d claim:                                      |          |
|       | ☐ At least one of the debtors and another                                     | ☐ Student loans  |   |          |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |
|       | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts              |          |
|       | Yes   | Other. Specify Unsecured                                     | <u> </u>                                      |          |
| 4.12  | Personal Finance/p312   | Last 4 digits of account number                              | 0001  | 0        |
|       | Nonpriority Creditor's Name   |  | Onemad 44/42 Last Astive                      |          |
|       | 1022 S. Mclean Blvd<br>Elgin, IL 60123  | When was the debt incurred?                                  | Opened 11/12 Last Active 7/21/14              |          |
|       | Number Street City State Zlp Code   | As of the date you file, the claim i                         | s: Check all that apply                       |          |
|       | Who incurred the debt? Check one.   | ☐ Contingent   |   |          |
|       | Debtor 1 only   | ☐ Unliquidated   |   |          |
|       | Debtor 2 only   | ☐ Disputed   |   |          |
|       | ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | d claim:                                      |          |
|       | ☐ At least one of the debtors and another                                     | ☐ Student loans  |   |          |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |
|       | ■ No  | Debts to pension or profit-sharin                            | g plans, and other similar debts              |          |
|       | Yes   | ■ Other. Specify Unsecured                                   | <u>.</u>                                      |          |
| 4.13  | Personal Finance/p312   | Last 4 digits of account number                              | 6501  | \$0.00   |
|       | Nonpriority Creditor's Name   |  |   |          |
|       | 1022 S. Mclean Blvd<br>Elgin, IL 60123  | When was the debt incurred?                                  | Opened 07/14 Last Active 7/31/14              |          |
|       | Number Street City State Zlp Code   | As of the date you file, the claim i                         | s: Check all that apply                       |          |
|       | Who incurred the debt? Check one.   | ☐ Contingent   |   |          |
|       | Debtor 1 only   | ☐ Unliquidated   |   |          |
|       | Debtor 2 only   | ☐ Disputed   |   |          |
|       | ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | d claim:                                      |          |

## Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Household Goods Secured

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

■ No

☐ Yes

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community debt

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Debtor 1 Jeffrey J Homan

|                          |            |   |            |     | Total Claim      |
|--------------------------|------------|---|------------|-----|------------------|
|                          | 6a.        | Domestic support obligations  | 6a.        | \$  | 0.00             |
| Total claims             | Cl-        | Towns and anti-in other debts was sure the manner of  | CI-        | •   |                  |
| from Part 1              | 6b.        | Taxes and certain other debts you owe the government  | 6b.        | \$  | 0.00             |
|                          | 6c.        | Claims for death or personal injury while you were intoxicated  | 6c.        | \$  | 0.00             |
|                          | 6d.        | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d.        | \$  | 0.00             |
|                          | 6e.        | Total Priority. Add lines 6a through 6d.  | 6e.        | \$  | 0.00             |
|                          |            |   |            |     |                  |
|                          |            |   |            |     | Total Claim      |
|                          | 6f.        | Student loans   | 6f.        | \$  | Total Claim 0.00 |
| Total claims from Part 2 | 6f.<br>6g. | Obligations arising out of a separation agreement or divorce that you                                   | 6f.<br>6g. | \$  |                  |
|                          |            |   |            | · — | 0.00             |
|                          | 6g.        | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.<br>6h. | \$  | 0.00             |

|   |                          | DOGUITIE                      | ili Paue zi ori | 50 |                                    |
|---|--------------------------|-------------------------------|-----------------|----|------------------------------------|
| Fill in this infor                      | rmation to identify your | case:                         |                 |    |                                    |
| Debtor 1                                | Jeffrey J Homan          |                               |                 |    |                                    |
|   | First Name               | Middle Name                   | Last Name       |    |                                    |
| Debtor 2                                |                          |                               |                 |    |                                    |
| (Spouse if, filing)                     | First Name               | Middle Name                   | Last Name       |    |                                    |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT OF ILLINOIS |                 |    |                                    |
| Case number                             |                          |                               |                 |    |                                    |
| (if known)                              |                          |                               |                 |    | Check if this is an amended filing |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with<br>Name, Number, | whom you have the<br>Street, City, State and ZIP | e contract or lease<br>Code | State what the contract or lease is for |  |  |  |  |
|-----|-----------|-------------------------------|--|-----------------------------|---|--|--|--|--|
| 2.1 |           |                               |  |                             |   |  |  |  |  |
|     | Name      |                               |  |                             | _                                       |  |  |  |  |
|     | Number    | Street                        |  |                             |   |  |  |  |  |
|     | City      |                               | State  | ZIP Code                    |   |  |  |  |  |
| 2.2 |           |                               |  |                             |   |  |  |  |  |
|     | Name      |                               |  |                             |   |  |  |  |  |
|     | Number    | Street                        |  |                             | _                                       |  |  |  |  |
|     | City      |                               | State  | ZIP Code                    |   |  |  |  |  |
| 2.3 |           |                               |  |                             |   |  |  |  |  |
|     | Name      |                               |  |                             | <del>_</del>                            |  |  |  |  |
|     | ramo      |                               |  |                             |   |  |  |  |  |
|     |           |                               |  |                             | <u> </u>                                |  |  |  |  |
|     | Number    | Street                        |  |                             |   |  |  |  |  |
|     | City      |                               | State  | ZIP Code                    | <u> </u>                                |  |  |  |  |
| 0.4 | City      |                               | State  | ZIP Code                    |   |  |  |  |  |
| 2.4 |           |                               |  |                             |   |  |  |  |  |
|     | Name      |                               |  |                             |   |  |  |  |  |
|     |           |                               |  |                             |   |  |  |  |  |
|     | Number    | Street                        |  |                             |   |  |  |  |  |
|     |           |                               |  |                             |   |  |  |  |  |
|     | City      |                               | State  | ZIP Code                    | _                                       |  |  |  |  |
| 2.5 |           |                               |  |                             |   |  |  |  |  |
|     | Name      |                               |  |                             | _                                       |  |  |  |  |
|     |           |                               |  |                             |   |  |  |  |  |
|     | Ni mahar  | Ctroot                        |  |                             | _                                       |  |  |  |  |
|     | Number    | Street                        |  |                             |   |  |  |  |  |
|     | City      |                               | State  | ZIP Code                    | _                                       |  |  |  |  |
|     | ,         |                               | <u> </u>   |                             |   |  |  |  |  |

|                                |  | Docume   | nt Page 28 c             | of 56  |
|--------------------------------|--|--|--------------------------|--|
| Fill in this                   | information to identify your                                       | case:  |                          |  |
| Debtor 1                       | Jeffrey J Homan  |  |                          |  |
|                                | First Name   | Middle Name  | Last Name                |  |
| Debtor 2<br>(Spouse if, filing | g) First Name  | Middle Name  | Last Name                |  |
|                                | es Bankruptcy Court for the:                                       | NORTHERN DISTRICT                                  |                          |  |
| Officed State                  | es Bankruptcy Court for the.                                       | NORTHERN DISTRICT                                  | OF ILLINOIS              |  |
| Case numb                      | per  |  |                          |  |
| (II KNOWN)                     |  |  |                          | ☐ Check if this is an amended filing   |
|                                |  |  |                          |  |
| Official                       | Form 106H  |  |                          |  |
| Sched                          | ule H: Your Code   | ebtors   |                          | 12/15  |
|                                |  |  |                          |  |
| ill it out, ar<br>our name     |  | boxes on the left. Attach<br>Answer every question | n the Additional Page t  | tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write   |
| 1. DO y                        | in y   | ou are ming a joint case,                          | do not not citnor opouse | as a societion.  |
| ■ No                           |  |  |                          |  |
| ☐ Yes                          |  |  |                          |  |
|                                | nin the last 8 years, have you<br>a, California, Idaho, Louisiana, |  |                          | ry? (Community property states and territories include ington, and Wisconsin.)   |
| ■ No.                          | Go to line 3.  |  |                          |  |
| ☐ Yes.                         | . Did your spouse, former spou                                     | se, or legal equivalent live                       | e with you at the time?  |  |
|                                |  |  |                          |  |
| in line<br>Form 1              | 2 again as a codebtor only if                                      | that person is a guaran                            | tor or cosigner. Make    | r if your spouse is filing with you. List the person shown<br>sure you have listed the creditor on Schedule D (Officia<br>06G). Use Schedule D, Schedule E/F, or Schedule G to |
|                                | Column 1: Your codebtor lame, Number, Street, City, State and ZIF  | <sup>o</sup> Code                                  |                          | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  |
| 3.1                            |  |  |                          | ☐ Schedule D, line   |
|                                | Name   |  |                          | ☐ Schedule E/F, line   |
|                                |  |  |                          | ☐ Schedule G, line   |
| <u> </u>                       | Number Street  |  |                          | _  |
| C                              | City   | State  | ZIP Code                 |  |
| 2.0                            |  |  |                          | Cabadula D. Kas  |
| 3.2                            | Name   |  |                          | _ □ Schedule D, line<br>□ Schedule E/F, line   |
|                                |  |  |                          | ☐ Schedule G, line   |
|                                | Number Street  |  |                          | _  |

State

City

ZIP Code

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|                          |  |   |   |  |                         |              | •                    |                          |                             |               |                                |                      |
|--------------------------|--|---|---|--|-------------------------|--------------|----------------------|--------------------------|-----------------------------|---------------|--------------------------------|----------------------|
|                          | in this information to ident   | , ,   |   |  |                         |              |                      |                          |                             |               |                                |                      |
| Del                      | btor 1 Jeffr   | rey J Ho  | man   |  |                         | _            |                      |                          |                             |               |                                |                      |
|                          | btor 2   |   |   |  |                         | _            |                      |                          |                             |               |                                |                      |
| Uni                      | ited States Bankruptcy Co  | urt for the                                       | NORTHERN DISTRIC                                      | T OF ILLINOIS                              |                         | _            |                      |                          |                             |               |                                |                      |
| (If kr                   | se number  | SI  |   |  |                         |              | □ A<br>□ A<br>1      | 3 income                 | ed filii<br>ent sl<br>as of | howin         | g postpetitio<br>ollowing date |                      |
|                          | chedule I: You   |   | - m-a   |  |                         |              | N                    | /IM / DD/ Y              | /YYY                        | ,             |                                | 12/15                |
| sup<br>spo<br>atta<br>Pa | as complete and accurate plying correct informations. If you are separated in a separate sheet to the place of the place o | on. If you<br>I and you<br>nis form. (<br>loyment | are married and not fili<br>r spouse is not filing wi | ng jointly, and you<br>ith you, do not inc | ır spouse<br>lude infor | is li<br>mat | ving with<br>on abou | n you, inc<br>It your sp | lude<br>ouse                | infor<br>If m | mation aboutore space is       | ut your<br>s needed, |
| 1.                       | information.   | ıτ  |   | Debtor 1                                   |                         |              |                      | Debtor 2                 | 2 or r                      | non-fi        | ling spouse                    |                      |
|                          | If you have more than one job, attach a separate page with information about additional employers.   |   | Employment status  Occupation                         | ☐ Employed ■ Not employed                  |                         |              |                      | ☐ Empl                   | •                           | yed           |                                |                      |
|                          | Include part-time, seaso self-employed work.   | nal, or   | Employer's name                                       |  |                         |              |                      |                          |                             |               |                                |                      |
|                          | Occupation may include or homemaker, if it appli   |   | Employer's address                                    |  |                         |              |                      |                          |                             |               |                                |                      |
|                          |  |   | How long employed the                                 | here?                                      |                         |              |                      |                          |                             |               |                                |                      |
| Pai                      | rt 2: Give Details A   | bout Mon  |   |  |                         |              |                      | _                        |                             |               |                                |                      |
|                          | imate monthly income as<br>use unless you are separa   | of the da   |   | you have nothing to                        | report for              | any          | line, writ           | e \$0 in the             | e spa                       | ce. Ir        | nclude your n                  | on-filing            |
| ,                        | ou or your non-filing spouse<br>e space, attach a separate   |   |   | ombine the informat                        | tion for all e          | emp          | loyers fo            | r that pers              | on or                       | n the         | lines below.                   | lf you need          |
|                          |  |   |   |  |                         |              | For Del              | btor 1                   |                             |               | btor 2 or<br>ng spouse         |                      |
| 2.                       |  |   | ry, and commissions (becalculate what the month)      |  | 2.                      | \$           |                      | 0.00                     | \$                          |               | 0.00                           | _                    |
| 3.                       | Estimate and list mont   | hly overti  | me pay.   |  | 3.                      | +\$          |                      | 0.00                     | +\$                         | i             | 0.00                           | _                    |
| 4.                       | Calculate gross Incom  | e. Add lir  | ne 2 + line 3.  |  | 4.                      | \$           |                      | 0.00                     |                             | \$            | 0.00                           |                      |

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| Debt    | or 1 _       | Jeffrey J Homan   |             | Cas       | e number ( <i>if known</i> ) |           |                        |   |
|---------|--------------|---|-------------|-----------|------------------------------|-----------|------------------------|---|
|         |              |   |             |           |                              |           |                        |   |
|         |              |   |             | Fo        | r Debtor 1                   | For       | Debtor 2 or            |   |
|         |              |   |             | . •       |                              |           | n-filing spouse        |   |
|         | Copy         | y line 4 here   | 4.          | \$        | 0.00                         | \$        | 0.00                   |   |
| E       | Lint         | all naveall daductions.   |             |           |                              |           |                        |   |
| 5.      |              | all payroll deductions:   | _           | •         |                              | •         |                        |   |
|         | 5a.          | Tax, Medicare, and Social Security deductions   | 5a.         | \$_       | 0.00                         | \$_       | 0.00                   |   |
|         | 5b.<br>5c.   | Mandatory contributions for retirement plans Voluntary contributions for retirement plans   | 5b.<br>5c.  | \$_<br>\$ | 0.00                         | \$_<br>\$ | 0.00                   |   |
|         | 5d.          | Required repayments of retirement fund loans  | 5d.         | \$<br>\$  | 0.00                         | \$<br>\$  | 0.00                   |   |
|         | 5e.          | Insurance   | 5e.         | \$        | 0.00                         | \$_       | 0.00                   |   |
|         | 5f.          | Domestic support obligations  | 5f.         | \$        | 0.00                         | \$        | 0.00                   |   |
|         | 5g.          | Union dues  | 5g.         | \$        | 0.00                         | \$        | 0.00                   |   |
|         | 5h.          | Other deductions. Specify:  | 5h.+        | + \$_     | 0.00                         | + \$_     | 0.00                   |   |
| 6.      | Add          | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.          | \$        | 0.00                         | \$        | 0.00                   |   |
| 7.      | Calc         | ulate total monthly take-home pay. Subtract line 6 from line 4.   | 7.          | \$        | 0.00                         | \$        | 0.00                   |   |
| 8.      | List         | all other income regularly received:  |             |           |                              |           |                        |   |
|         | 8a.          | Net income from rental property and from operating a business,  |             |           |                              |           |                        |   |
|         |              | profession, or farm Attach a statement for each property and business showing gross   |             |           |                              |           |                        |   |
|         |              | receipts, ordinary and necessary business expenses, and the total   |             |           |                              |           |                        |   |
|         |              | monthly net income.   | 8a.         | \$        | 0.00                         | \$        | 0.00                   |   |
|         | 8b.          | Interest and dividends  | 8b.         | \$        | 0.00                         | \$        | 0.00                   |   |
|         | 8c.          | Family support payments that you, a non-filing spouse, or a dependent   | ent         |           |                              |           |                        |   |
|         |              | regularly receive Include alimony, spousal support, child support, maintenance, divorce   |             |           |                              |           |                        |   |
|         |              | settlement, and property settlement.  | 8c.         | \$        | 0.00                         | \$        | 0.00                   |   |
|         | 8d.          | Unemployment compensation   | 8d.         | \$        | 2,292.00                     | \$_       | 0.00                   |   |
|         | 8e.          | Social Security   | 8e.         | \$        | 0.00                         | \$_       | 0.00                   |   |
|         | 8f.          | Other government assistance that you regularly receive  |             | _         |                              |           |                        |   |
|         |              | Include cash assistance and the value (if known) of any non-cash assistant that you read to a feed at a series of the control | nce         |           |                              |           |                        |   |
|         |              | that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  |             |           |                              |           |                        |   |
|         |              | Specify:  | 8f.         | \$        | 0.00                         | \$        | 0.00                   |   |
|         | 8g.          | Pension or retirement income  | 8g.         | \$        | 0.00                         | \$        | 0.00                   |   |
|         |              | Assistance from family until  |             |           | 202.00                       |           | 2.00                   |   |
|         | 8h.          | Other monthly income. Specify: debtor can find new job  | 8h          | + \$_     | 600.00                       | + \$_     | 0.00                   |   |
| 9.      | Add          | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.          | \$        | 2,892.00                     | \$        | 0.00                   |   |
|         |              | ·   | _           |           |                              |           |                        |   |
| 10.     | Calc         | ulate monthly income. Add line 7 + line 9.  | 10. \$      |           | 2,892.00 + \$                |           | 0.00 = \$ 2            | ,892.00                                 |
|         |              | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |             |           |                              |           |                        | ,                                       |
| 11      | State        | e all other regular contributions to the expenses that you list in Sched  | ule .l      |           | ,                            |           |                        |   |
| • • • • |              | de contributions from an unmarried partner, members of your household, you  |             | ndent     | s, your roommate             | s, and    |                        |   |
|         |              | r friends or relatives.   |             |           |                              |           |                        |   |
|         | Do n<br>Spec | ot include any amounts already included in lines 2-10 or amounts that are r   | not availa  | ble to    | pay expenses lis             | ited in   | Schedule J.<br>11. +\$ | 0.00                                    |
|         | Opoc         |   |             |           |                              |           |                        | 0.00                                    |
| 12.     |              | the amount in the last column of line 10 to the amount in line 11. The  |             |           |                              |           | e.                     |   |
|         |              | e that amount on the Summary of Schedules and Statistical Summary of Ce   | ertain Lial | bilitie   | s and Related Da             | ta, if it | 12. \$ 2               | .892.00                                 |
|         | appli        | es  |             |           |                              |           | ΙΖ. Ψ                  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|         |              |   |             |           |                              |           | Combine                |   |
| 13      | Do v         | ou expect an increase or decrease within the year after you file this fo  | rm?         |           |                              |           | monthly i              | ncome                                   |
| 13.     |              | No.   |             |           |                              |           |                        |   |
|         |              | Yes. Explain: Debtor is looking for full time employment.   |             |           |                              |           |                        |   |

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|                   |   |  |                                     |  |   | •            |                                       |   |
|-------------------|---|--|-------------------------------------|--|---|--------------|---------------------------------------|---|
| FIII              | in this informa                           | tion to identify yo                                    | our case:                           |  |   |              |                                       |   |
| Deb               | otor 1                                    | Jeffrey J Hor  | man                                 |  |   |              | k if this is:                         |   |
| Deb               | otor 2                                    |  |                                     |  |   | _            | An amended filing<br>A supplement sho | wing postpetition chapter                           |
| (Spo              | ouse, if filing)                          |  |                                     |  |   |              |                                       | the following date:                                 |
| Unit              | ed States Bankr                           | uptcy Court for the:                                   | NORTH                               | HERN DISTRICT OF ILLIN                                 | IOIS                                    | Ī            | MM / DD / YYYY                        |   |
|                   | e number<br>nown)                         |  |                                     |  |   |              |                                       |   |
| Of                | fficial Fo                                | rm 106J  |                                     |  |   | 1            |                                       |   |
|                   |   | J: Your I  | Evnor                               | 1606   |   |              |                                       | 12/1:   |
| Be<br>info<br>nur | as complete ormation. If manager (if know | and accurate as<br>lore space is ne<br>n). Answer ever | possible<br>eded, atta<br>y questio | . If two married people a<br>ach another sheet to this |   |              |                                       | or supplying correct                                |
| Par<br>1.         | t 1: Descr<br>Is this a joir              | ibe Your House   | hold                                |  |   |              |                                       |   |
| ١.                | ■ No. Go to                               | line 2.  | in a senai                          | rate household?  |   |              |                                       |   |
|                   | □ res. <b>Doc</b>                         |  | п а зера                            | ate nousenoid:   |   |              |                                       |   |
|                   |   |  | st file Offic                       | ial Form 106J-2, Expense                               | s for Separate Hous                     | ehold of Deb | tor 2.                                |   |
| 2.                | Do vou have                               | e dependents?  | □ No                                |  |   |              |                                       |   |
|                   | Do not list D<br>and Debtor 2             | ebtor 1  | Yes.                                | Fill out this information for each dependent           | Dependent's relati<br>Debtor 1 or Debto |              | Dependent's age                       | Does dependent live with you?                       |
|                   | Do not state                              |  |                                     |  | 0                                       |              | 4                                     | □ No  |
|                   | dependents                                | names.   |                                     |  | Son                                     |              |                                       | ■ Yes<br>□ No                                       |
|                   |   |  |                                     |  | Son                                     |              | 3                                     | ■ Yes   |
|                   |   |  |                                     |  |   |              |                                       | □ No  |
|                   |   |  |                                     |  |   |              |                                       | ☐ Yes   |
|                   |   |  |                                     |  |   |              |                                       | □ No  |
| _                 | _   |  |                                     |  |   |              |                                       | ☐ Yes   |
| 3.                | expenses of                               | enses include<br>f people other t<br>d your depende    | han $_{\square}$                    | No<br>Yes  |   |              |                                       |   |
| Est<br>exp        | imate your ex                             |  | our bankr                           | uptcy filing date unless y                             |   |              |                                       | apter 13 case to report of the form and fill in the |
| the               |   | h assistance an  |                                     | government assistance cluded it on Schedule I:         |   |              | Your exp                              | enses   |
| 4.                |   | or home owners<br>and any rent for the                 |                                     | nses for your residence.                               | Include first mortgag                   | ge<br>4. \$  |                                       | 1,300.00  |
|                   | If not includ                             | led in line 4:   |                                     |  |   |              |                                       |   |
|                   | 4a. Real e                                | estate taxes   |                                     |  |   | 4a. \$       |                                       | 0.00  |
|                   |   | rty, homeowner's                                       | s, or renter                        | r's insurance  |   | 4b. \$       |                                       | 0.00  |
|                   | 4c. Home                                  | maintenance, re  | pair, and                           | upkeep expenses  |   | 4c. \$       |                                       | 0.00  |
| _                 |   | owner's associat                                       |                                     |  |   | 4d. \$       |                                       | 0.00  |
| 5                 | Additional r                              | nortaade navme   | ante for w                          | <b>our residence</b> , such as ho                      | ancol vituna amo                        | 5 \$         |                                       | 0.00  |

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| Deb | otor 1 <b>Jeffrey J Homan</b>  | Case num | ber (if known) |          |
|-----|--|----------|----------------|----------|
| 6.  | Utilities:   |          |                |          |
| 0.  | 6a. Electricity, heat, natural gas   | 6a.      | \$             | 180.00   |
|     | 6b. Water, sewer, garbage collection   | 6b.      | \$             | 0.00     |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c.      | \$             | 180.00   |
|     | 6d. Other. Specify:  | 6d.      | \$             | 0.00     |
| 7.  | Food and housekeeping supplies   | 7.       | \$             | 400.00   |
| 8.  | Childcare and children's education costs   | 8.       | \$             | 0.00     |
| 9.  | Clothing, laundry, and dry cleaning  | 9.       | \$             | 0.00     |
| 10. |  | 10.      | \$             | 20.00    |
| 11. |  | 11.      | \$             | 0.00     |
| 12. | <b>Transportation.</b> Include gas, maintenance, bus or train fare.  |          |                |          |
|     | Do not include car payments.   | 12.      | \$             | 100.00   |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books   | 13.      | \$             | 0.00     |
| 14. | Charitable contributions and religious donations   | 14.      | \$             | 0.00     |
| 15. | Insurance.   |          |                |          |
|     | Do not include insurance deducted from your pay or included in lines 4 or 20.  | 4-       | •              |          |
|     | 15a. Life insurance  | 15a.     | ·              | 0.00     |
|     | 15b. Health insurance  | 15b.     | · .            | 0.00     |
|     | 15c. Vehicle insurance   | 15c.     | · -            | 86.00    |
| 40  | 15d. Other insurance. Specify:   | 15d.     | \$             | 0.00     |
|     | <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:   | 16.      | \$             | 0.00     |
| 17. | Installment or lease payments:   | 47       | •              |          |
|     | 17a. Car payments for Vehicle 1  | 17a.     | *              | 550.00   |
|     | 17b. Car payments for Vehicle 2  | 17b.     | ·              | 0.00     |
|     | 17c. Other. Specify:   | 17c.     | *              | 0.00     |
|     | 17d. Other. Specify:   | 17d.     | \$             | 0.00     |
| 18. | Your payments of alimony, maintenance, and support that you did not report   |          | \$             | 0.00     |
| 10  | deducted from your pay on line 5, Schedule I, Your Income (Official Form 106 Other payments you make to support others who do not live with you. | oi)      | \$             | 0.00     |
| 10. | Specify:   | 19.      | Ψ              | 0.00     |
| 20  | Other real property expenses not included in lines 4 or 5 of this form or on So  |          | our Income     |          |
| 20. | 20a. Mortgages on other property   | 20a.     |                | 0.00     |
|     | 20b. Real estate taxes   | 20b.     | ·              | 0.00     |
|     | 20c. Property, homeowner's, or renter's insurance  | 20c.     | \$             | 0.00     |
|     | 20d. Maintenance, repair, and upkeep expenses  | 20d.     | \$             | 0.00     |
|     | 20e. Homeowner's association or condominium dues   | 20e.     | · -            | 0.00     |
| 21. | Other: Specify:  |          | +\$            | 0.00     |
|     | '  |          |                |          |
| 22. | Calculate your monthly expenses  |          |                |          |
|     | 22a. Add lines 4 through 21.   |          | \$             | 2,816.00 |
|     | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-  | -2       | \$             |          |
|     | 22c. Add line 22a and 22b. The result is your monthly expenses.  |          | \$             | 2,816.00 |
| 23. | Calculate your monthly net income.   |          |                |          |
|     | 23a. Copy line 12 (your combined monthly income) from Schedule I.  | 23a.     |                | 2,892.00 |
|     | 23b. Copy your monthly expenses from line 22c above.   | 23b.     | -\$            | 2,816.00 |
|     | 23c. Subtract your monthly expenses from your monthly income.  | 23c.     | \$             | 76.00    |
|     | The result is your monthly net income.   | 200.     | *              | - 3.00   |

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor lost his job in January 2017 and his only current source of income is unemployment. Family will assist him in living expenses until he can find new job. His household is living on mininal budge which will necessarily increase in near future.

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| Fill in this inforr                                   | mation to identify your                        | case:  |                            |                          |   |  |  |  |
|---|--|--|----------------------------|--------------------------|---|--|--|--|
| Debtor 1  | Jeffrey J Homan                                |  |                            |                          |   |  |  |  |
|   | First Name                                     | Middle Name                                      | Last Name                  |                          |   |  |  |  |
| Debtor 2<br>(Spouse if, filing)                       | First Name                                     | Middle Name                                      | Last Name                  |                          |   |  |  |  |
| United States Ba                                      | nkruptcy Court for the:                        | NORTHERN DISTRICT                                | OF ILLINOIS                |                          |   |  |  |  |
| Case number<br>(if known)                             |  |  |                            |                          | ☐ Check if this is an amended filing  |  |  |  |
| Official Forn   |  | n Individual                                     | Dobtorio So                | hadulaa                  |   |  |  |  |
| Declarat  | ion About a                                    | n individual                                     | Debtor's Sc                | neaules                  | 12/15   |  |  |  |
| You must file this obtaining money years, or both. 18 | s form whenever you fil                        | e bankruptcy schedules<br>connection with a banl |                            | s. Making a false state  | ement, concealing property, or<br>00, or imprisonment for up to 20              |  |  |  |
| Did you pay   | y or agree to pay some                         | one who is NOT an attor                          | ney to help you fill out b | pankruptcy forms?        |   |  |  |  |
| ■ No  |  |  |                            |                          |   |  |  |  |
| ☐ Yes. N  | lame of person                                 |  |                            |                          | Bankruptcy Petition Preparer's Notice, ation, and Signature (Official Form 119) |  |  |  |
|   | Ity of perjury, I declare to true and correct. | that I have read the sum                         | mary and schedules file    | ed with this declaration | on and  |  |  |  |
| Jeffrey   | rey J Homan<br>J Homan<br>e of Debtor 1        |  | XSignature of              | Debtor 2                 |   |  |  |  |

Date

Date March 21, 2017

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| Sill i          | n this inform                 | nation to identify you   | r case.  |   |  |   |  |  |  |
|-----------------|-------------------------------|--|--|---|--|---|--|--|--|
| Debt            |                               | Jeffrey J Homan  |  |   |  |   |  |  |  |
| Debi            | 101 1                         | First Name   | Middle Name  | Last Name   |  |   |  |  |  |
| Debt            | tor 2<br>se if, filing)       | First Name   | Middle Name  | Last Name   |  |   |  |  |  |
| , .             |                               | nkruptcy Court for the:  |  |   |  |   |  |  |  |
|                 |                               | ikruptcy Court for the.  | NORTHERN DIOTRIOT  | JI ILLINOIO   |  |   |  |  |  |
| Case<br>(if kno | e number<br><sub></sub>       |  |  |   |  | Check if this is an mended filing                     |  |  |  |
|                 | icial For                     |  | Affairs for Individ  | luals Filing for B                                    | ankruptcy  | 4/10  |  |  |  |
| inforı          | mation. If m<br>ber (if known | ore space is needed<br>a). Answer every que  | , attach a separate sheet to   | this form. On the top of an                           | e equally responsible for su<br>y additional pages, write yo |   |  |  |  |
|                 |                               | current marital statu  |  | Liveu Belole  |  |   |  |  |  |
| <br>            | ■ Married □ Not mar           | ried   |  |   |  |   |  |  |  |
| 2. I            | During the la                 | last 3 years, have you lived anywhere other than where you live now?                     |  |   |  |   |  |  |  |
|                 | _                             |  |  |   |  |   |  |  |  |
| l               | ■ No<br>□ Yes. List           | List all of the places you lived in the last 3 years. Do not include where you live now. |  |   |  |   |  |  |  |
|                 | Debtor 1 Pri                  | ior Address:   | Dates Debtor 1 lived there   | Debtor 2 Prior Ad                                     | dress:   | Dates Debtor 2 lived there                            |  |  |  |
|                 |                               |  |  |   | nity property state or territo                               |   |  |  |  |
|                 | ■ No                          | a.a  |  |   | ico, rozao, rrasimigion ana                                  |   |  |  |  |
| ı               | ☐ Yes. Ma                     | ke sure you fill out Sc  | hedule H: Your Codebtors (O  | fficial Form 106H).                                   |  |   |  |  |  |
| Part            | 2 Explain                     | n the Sources of You   | ır Income  |   |  |   |  |  |  |
| I               | Fill in the tota              | I amount of income yo  | mployment or from operating ou received from all jobs and a have income that you receive | all businesses, including par                         |  | endar years?  |  |  |  |
| ı               | □ No                          |  |  |   |  |   |  |  |  |
| ı               | Yes. Fill                     | in the details.  |  |   |  |   |  |  |  |
|                 |                               |  | Debtor 1   |   | Debtor 2   |   |  |  |  |
|                 |                               |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                   | Gross income<br>(before deductions<br>and exclusions) |  |  |  |
|                 |                               | •  | ■ Wages, commissions, bonuses, tips  | \$1,887.00  | ☐ Wages, commissions, bonuses, tips                          |   |  |  |  |
|                 |                               |  | ☐ Operating a business   |   | ☐ Operating a business                                       |   |  |  |  |

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Case number (if known) Debtor 1 Jeffrey J Homan

| Debto  |   | Debtor 1  | Debtor 2   |  |  |   |                              |   |  |  |
|--|---|---|--|--|--|---|------------------------------|---|--|--|
|  |   | Sources of income<br>Check all that apply.      |  |  | ome<br>pply.   | Gross income<br>(before deductions<br>and exclusions) |                              |   |  |  |
| For last calendar year:<br>(January 1 to December 31, 2016)          |   | ■ Wages, commissions, bonuses, tips             |  |  | ☐ Wages, commissions, bonuses, tips                              |   |                              |   |  |  |
|  |   |   |  | ☐ Operating a business   |  | ☐ Operating a   | business                     |   |  |  |
| For the calendar year before that: (January 1 to December 31, 2015 ) |   | ■ Wages, commissions, bonuses, tips \$86,811.00 |  | ☐ Wages, commissions, bonuses, tips  |  |   |                              |   |  |  |
|  |   |   |  | ☐ Operating a business   |  | ☐ Operating a   | business                     |   |  |  |
|  | unemploying ambling a List each s   | ment, and or<br>and lottery w                   | ther public be<br>vinnings. If yo<br>he gross inco   | ner that income is taxable. Exemelit payments; pensions; rerule are filing a joint case and your from each source separa               | ntal income; interest; divider<br>ou have income that you red    | nds; money collecte<br>ceived together, list          | ed from laws<br>it only once | uits; royalties; and                                  |  |  |
|  |   |   |  | Debtor 1<br>Sources of income<br>Describe below.   | Gross income from each source (before deductions and exclusions) | Debtor 2<br>Sources of inc<br>Describe below.         |                              | Gross income<br>(before deductions<br>and exclusions) |  |  |
|  |   | 1 of curre                                      | nt year until<br>nkruptcy:   | Unemployment   | \$3,500.00   |   |                              |   |  |  |
|  |   |   |  |  |  |   |                              |   |  |  |
|  |   |   | -  | Made Before You Filed for  |  |   |                              |   |  |  |
| 6.   | Are either Debtor 1's or Debtor 2's debts primarily consumer debts?  No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose." |   |  |  |  |   |                              |   |  |  |
|  |   | _   | uring the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? |  |  |   |                              |   |  |  |
|  |   | No. Go to                                       |  |  |  |   |                              |   |  |  |
|  |   | □ Yes   | paid that cre<br>not include   | each creditor to whom you pai<br>editor. Do not include paymer<br>payments to an attorney for the                                      | nts for domestic support obli<br>nis bankruptcy case.            | gations, such as ch                                   | nild support                 | and alimony. Also, do                                 |  |  |
|  | * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.   |   |  |  |  |   |                              |   |  |  |
|  | ■ Yes.  |   |  | otor 2 or both have primarily consumer debts.  sys before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? |  |   |                              |   |  |  |
|  |   | ■ No.   | Go to line 7   | to line 7.   |  |   |                              |   |  |  |
|  |   | □ Yes   | include pay  | each creditor to whom you pai<br>ments for domestic support o<br>for this bankruptcy case.   |  |   |                              |   |  |  |
|  | Creditor'   | s Name and                                      | d Address  | Dates of payme   | nt Total amount paid   | Amount you still owe                                  | Was this                     | payment for   |  |  |
|  |   |   |  |  | •  |   |                              |   |  |  |

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| 7.  | 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managincluding one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, successful alimony.  |                         |                     |                      |                     |                              |  |  |
|-----|---|-------------------------|---------------------|----------------------|---------------------|------------------------------|--|--|
|     | ☐ Yes. List all payments to an insider.   |                         |                     |                      |                     |                              |  |  |
|     | Insider's Name and Address  | Dates of payment        | Total amount paid   | Amount you still owe | Reason for          | this payment                 |  |  |
| 8.  | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an nsider?  nclude payments on debts guaranteed or cosigned by an insider.  |                         |                     |                      |                     |                              |  |  |
|     | <ul><li>No</li><li>☐ Yes. List all payments to an insider</li></ul>   |                         |                     |                      |                     |                              |  |  |
|     | Insider's Name and Address  | Dates of payment        | Total amount paid   | Amount you still owe |                     | this payment<br>ditor's name |  |  |
| Pai | rt 4: Identify Legal Actions, Repossession  | s. and Foreclosures     |                     |                      |                     |                              |  |  |
| 9.  | Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.  No Yes. Fill in the details.   |                         |                     |                      |                     |                              |  |  |
|     | Case title<br>Case number   | Nature of the case      | Court or agency     |                      | Status of the case  |                              |  |  |
| 10. | Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address  |                         |                     | oreclosed, garni     |                     | Value of the property        |  |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment becan solve to the solve to | ause you owed a debt?   | ·                   |                      |                     |                              |  |  |
|     | Creditor Name and Address   | Describe the action the | creditor took       | take                 | action was          | Amount                       |  |  |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a  No Yes  |                         | erty in the possess | ion of an assign     | ee for the ben      | efit of creditors, a         |  |  |
| Pa  | tt 5: List Certain Gifts and Contributions  |                         |                     |                      |                     |                              |  |  |
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift.  |                         |                     |                      |                     |                              |  |  |
|     | Gifts with a total value of more than \$600 per person  | Describe the gifts      |                     | Date<br>the g        | s you gave<br>gifts | Value                        |  |  |
|     | Person to Whom You Gave the Gift and Address:   |                         |                     |                      |                     |                              |  |  |

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|     | comby o moman   |                             |   |              |   |                        |  |
|-----|---|-----------------------------|---|--------------|---|------------------------|--|
|     |   |                             |   |              |   |                        |  |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No   |                             |   |              |   |                        |  |
|     | Yes. Fill in the details for each gift or   | contribu                    | tion.   |              |   |                        |  |
|     | Gifts or contributions to charities that<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Cod   |                             | Describe what you contributed   |              | Dates you contributed                   | Value                  |  |
| Par | t 6: List Certain Losses  |                             |   |              |   |                        |  |
| 15. | Within 1 year before you filed for bankru<br>disaster, or gambling?   | uptcy o                     | r since you filed for bankruptcy, did y   | ou lose anyt | hing because of the                     | eft, fire, other       |  |
|     | ■ No  |                             |   |              |   |                        |  |
|     | ☐ Yes. Fill in the details.   |                             |   |              |   |                        |  |
|     | Describe the property you lost and how the loss occurred  | Include                     | ibe any insurance coverage for the lo<br>e the amount that insurance has paid. L<br>ng insurance claims on line 33 of Sched<br>rty. | .ist         | Date of your loss                       | Value of property lost |  |
| Par | t 7: List Certain Payments or Transfer  | •                           | ,   |              |   |                        |  |
|     | consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition Includes | prepare                     |   |              | Date payment or transfer was made       | Amount of payment      |  |
|     | Cutler & Associates, Ltd<br>4131 Main Street<br>Skokie, IL 60076<br>david@cutlerltd.com   |                             | Attorney Fees   |              | March 2017                              | \$200.00               |  |
| 17. | Within 1 year before you filed for bankru<br>promised to help you deal with your cre<br>Do not include any payment or transfer tha  | ditors                      | or to make payments to your creditors   |              | or transfer any prope                   | erty to anyone who     |  |
|     | ■ No □ Yes. Fill in the details.  |                             |   |              |   |                        |  |
|     |   |                             | Description and relative of annual  |              | D-1                                     | A                      |  |
|     | Person Who Was Paid<br>Address  |                             | Description and value of any proper transferred   | erty         | Date payment<br>or transfer was<br>made | Amount of payment      |  |
| 18. | Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No  Yes. Fill in the details.  | u <b>r bus</b> iı<br>s made | ness or financial affairs? as security (such as the granting of a s   |              |   |                        |  |
|     | Person Who Received Transfer  |                             | Description and value of  | Describe :   | any property or                         | Date transfer was      |  |
|     |   |                             | ,   | _ 300.100    | , p p                                   | u                      |  |

Address

property transferred

Person's relationship to you

made

payments received or debts

paid in exchange

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19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Debtor 1 Jeffrey J Homan

|     | <b>beneficiary?</b> (These are often called asset-protect   | ction aevices.)  |                        |  |   |  |  |  |  |
|-----|---|--|------------------------|--|---|--|--|--|--|
|     | ■ No □ Yes. Fill in the details.  |  |                        |  |   |  |  |  |  |
|     | Name of trust   | Description and value  | of the property tran   | nsferred   | Date Transfer was made                        |  |  |  |  |
| Par | rt 8: List of Certain Financial Accounts, Instru  | ıments, Safe Deposit Box   | es, and Storage Un     | its  |   |  |  |  |  |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage |  |                        |  |   |  |  |  |  |
|     | houses, pension funds, cooperatives, associat  No  Yes. Fill in the details.  |  |                        | 51, 511a 55 in Sainte, 515a.                         | . uniono, pronorago                           |  |  |  |  |
|     |   |  | e of account or rument | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |  |  |  |  |
| 21. | Do you now have, or did you have within 1 yea cash, or other valuables?   | r before you filed for ban   | ruptcy, any safe de    | eposit box or other deposi                           | tory for securities,                          |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |  |                        |  |   |  |  |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had access to Address (Number, Street, C State and ZIP Code)                |                        | e the contents                                       | Do you still have it?                         |  |  |  |  |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?   |  |                        |  |   |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |  |                        |  |   |  |  |  |  |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)  | Who else has or had a<br>to it?<br>Address (Number, Street, C<br>State and ZIP Code) |                        | e the contents                                       | Do you still have it?                         |  |  |  |  |
| Par | t 9: Identify Property You Hold or Control for  | Someone Else   |                        |  |   |  |  |  |  |
| 23. | Do you hold or control any property that some for someone.  | one else owns? Include a   | ny property you bo     | rrowed from, are storing f                           | or, or hold in trust                          |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |  |                        |  |   |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State ar<br>Code)                   | Describe               | e the property                                       | Value   |  |  |  |  |
| Par | rt 10: Give Details About Environmental Inform  | ·  |                        |  |   |  |  |  |  |
| For | the purpose of Part 10, the following definitions   | s apply:   |                        |  |   |  |  |  |  |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su   | air, land, soil, surface wa  | er, groundwater, o     |  |   |  |  |  |  |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposa   | s defined under any envir  |                        | ther you now own, operate                            | , or utilize it or used                       |  |  |  |  |
|     | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.   |  |                        |  |   |  |  |  |  |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Jeffrey J Homan

| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? |  |                                       |                    |  |  |  |
|-----|--|--|---------------------------------------|--------------------|--|--|--|
|     | ■ No □ Yes. Fill in the details.   |  |                                       |                    |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State and ZIP Code)       | Environmental law, if you know it     | Date of notice     |  |  |  |
| 25. | Have you notified any governmental unit of ar  | ny release of hazardous material?  |                                       |                    |  |  |  |
|     | ■ No<br>□ Yes. Fill in the details.  |  |                                       |                    |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it     | Date of notice     |  |  |  |
| 26. | Have you been a party in any judicial or admir   | nistrative proceeding under any envi                                       | ronmental law? Include settlements    | and orders.        |  |  |  |
|     | ■ No<br>□ Yes. Fill in the details.  |  |                                       |                    |  |  |  |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case                    | Status of the case |  |  |  |
| Par | 11: Give Details About Your Business or Co   | onnections to Any Business   |                                       |                    |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy   | , did you own a business or have an  | y of the following connections to any | y business?        |  |  |  |
|     | ☐ A sole proprietor or self-employed in a  | a trade, profession, or other activity,                                    | either full-time or part-time         |                    |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |                                       |                    |  |  |  |
|     | ☐ A partner in a partnership   |  |                                       |                    |  |  |  |
|     | ☐ An officer, director, or managing executive of a corporation   |  |                                       |                    |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |  |                                       |                    |  |  |  |
|     | No. None of the above applies. Go to Part 12.  |  |                                       |                    |  |  |  |
|     | Yes. Check all that apply above and fill in the details below for each business.   |  |                                       |                    |  |  |  |
|     | Business Name D Address  | Describe the nature of the business  | Employer Identification number        |                    |  |  |  |
|     |  | lame of accountant or bookkeeper   | Do not include Social Security        | number of frin.    |  |  |  |
| 28. | Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.  | r, did you give a financial statement t                                    | o anyone about your business? Inclu   | ude all financial  |  |  |  |
|     | ■ No<br>□ Yes. Fill in the details below.  |  |                                       |                    |  |  |  |
|     | Name Address (Number, Street, City, State and ZIP Code)  | ate Issued   |                                       |                    |  |  |  |
|     |  |  |                                       |                    |  |  |  |

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Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

1/s/ Jeffrey J Homan

Jeffrey J Homan

Signature of Debtor 2

Signature of Debtor 1

Date

March 21, 2017

Date

Date

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

■ No

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| Fill in this inform               | nation to identify your                         | case:                |                 |  |                 |   |
|-----------------------------------|---|----------------------|-----------------|--|-----------------|---|
| Debtor 1                          | Jeffrey J Homan                                 |                      |                 |  |                 |   |
|                                   | First Name                                      | Middle Name          |                 | Last Name  |                 |   |
| Debtor 2<br>(Spouse if, filing)   | First Name                                      | Middle Name          |                 | Last Name  |                 |   |
| United States Bar                 | nkruptcy Court for the:                         | NORTHERN DIST        | TRICT OF ILL    | INOIS  |                 |   |
| Case number                       |   |                      |                 |  |                 |   |
| (if known)                        |   |                      |                 |  |                 | ☐ Check if this is an                               |
|                                   |   |                      |                 |  |                 | amended filing                                      |
|                                   |   |                      |                 |  |                 |   |
| Official Fo                       |   |                      |                 |  | _               | _   |
| Statemen                          | <u>it of Intentio</u>                           | <u>n for Indiv</u>   | <u>/iduals</u>  | Filing Under Ch  | napter 7        | 12/15   |
| If you are an indi                | vidual filing under cha                         | nter 7 vou must fil  | ll out this for | m if·  |                 |   |
|                                   | claims secured by yo                            | -                    | ii out uns ion  |  |                 |   |
|                                   | ed personal property a                          |                      |                 |  |                 |   |
|                                   |   |                      |                 | bankruptcy petition or by the<br>use. You must also send cop |                 |   |
| on the f                          | orm   |                      |                 |  |                 | ·   |
|                                   |   | in a joint case, bo  | oth are equall  | y responsible for supplying o                                | correct inform  | ation. Both debtors must                            |
| •                                 | d date the form.                                |                      |                 |  |                 |   |
|                                   | and accurate as possib<br>our name and case num |                      | s needed, atta  | ach a separate sheet to this f                               | orm. On the to  | op of any additional pages,                         |
| Dort 1: Lint Vo                   | Craditara Wha Hay                               | · Seeured Claims     |                 |  |                 |   |
|                                   | our Creditors Who Have                          |                      |                 |  |                 |   |
| 1. For any credito information be |   | art 1 of Schedule D  | ): Creditors V  | Vho Have Claims Secured by                                   | Property (Off   | icial Form 106D), fill in the                       |
| Identify the cre                  | editor and the property t                       | hat is collateral    | What do you     | ou intend to do with the prop                                | erty that       | Did you claim the property as exempt on Schedule C? |
|                                   |   |                      | Secures a       | uebi :   |                 | as exempt on schedule C:                            |
| Creditor's R                      | uth Kinast                                      |                      | Currond         | or the property  |                 | □ No  |
| name:                             | utii Kiiiast                                    |                      |                 | er the property. the property and redeem it.                 |                 | □ NO  |
| Description of                    | 200 North Drive So                              | uth Elgin II         |                 | he property and enter into a                                 |                 | Yes   |
| property                          | 60177 Kane Coun                                 |                      |                 | mation Agreement. he property and [explain]:                 |                 |   |
| securing debt:                    | Value per Redfin \$ 3/8/17 less cost of         |                      | - retain ti     | ne property and [explain].                                   |                 |   |
|                                   | 3/0/17 less cost of                             | Sale                 |                 |  |                 |   |
|                                   | ur Unexpired Persona                            | <u> </u>             | in Schedule     | G: Executory Contracts and                                   | Unevnired Le    | ases (Official Form 106G), fill                     |
| in the information                | n below. Do not list rea                        | al estate leases. Un | nexpired leas   | es are leases that are still in                              | effect; the lea | se period has not yet ended.                        |
| You may assume                    | an unexpired persona                            | I property lease if  | the trustee d   | oes not assume it. 11 U.S.C.                                 | § 365(p)(2).    |   |
| Describe your un                  | nexpired personal prop                          | perty leases         |                 |  | Will            | the lease be assumed?                               |
| Lessor's name:                    |   |                      |                 |  | <b></b>         | No  |
| Description of lea<br>Property:   | sed   |                      |                 |  | п,              | ,   |
| . ropolty.                        |   |                      |                 |  |                 | res   |
| Lessor's name:                    | and   |                      |                 |  | □ 1             | No  |
| Description of lea<br>Property:   | sea   |                      |                 |  |                 | ⁄es   |
|                                   |   |                      |                 |  |                 |   |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| De         | btor 1               | Jeffrey J Homan   | Case number (if known)   |
|------------|----------------------|---|--|
|            |                      |   |  |
|            | ssor's n             |   | □ No   |
|            | scription<br>operty: | n of leased   | ☐ Yes  |
|            | ssor's n             |   | □ No   |
|            | scription<br>operty: | n of leased   | ☐ Yes  |
|            | ssor's n             | ame:<br>n of leased   | □ No   |
|            | operty:              | Torreased   | ☐ Yes  |
|            | ssor's n             | ame:<br>n of leased   | □ No   |
|            | operty:              | TOFICASEU   | ☐ Yes  |
|            | ssor's n             |   | □ No   |
|            | scription<br>operty: | n of leased   | ☐ Yes  |
| Pa         | rt 3:                | Sign Below  |  |
| Unc<br>pro | der pen<br>perty th  | alty of perjury, I declare that I have indica<br>at is subject to an unexpired lease. | ed my intention about any property of my estate that secures a debt and any personal |
| Χ          |                      | effrey J Homan  | X  |
|            |                      | ey J Homan  | Signature of Debtor 2  |
|            | Signa                | ture of Debtor 1  |  |
|            | Date                 | March 21, 2017  | Date   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-08954 Doc 1 Filed 03/21/17 Entered 03/21/17 18:45:44 Desc Main Document Page 47 of 56

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

| In re        | Jeffrey J Homan  |  | Case No.  |                                    |    |
|--------------|--|--|---|------------------------------------|----|
|              |  | Debtor(s)  | Chapter   | 7                                  | _  |
|              | DISCLOSURE OF COMPEN   | SATION OF ATTO   | RNEY FOR DI   | EBTOR(S)                           |    |
| c            | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(I compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of  | of the petition in bankruptcy  | , or agreed to be paid  | to me, for services rendered or to |    |
|              | For legal services, I have agreed to accept  |  | \$  | 1,450.00                           |    |
|              | Prior to the filing of this statement I have received  |  | \$  | 200.00                             |    |
|              | Balance Due  |  | \$  | 1,250.00                           |    |
| 2. \$        | \$ 335.00 of the filing fee has been paid.   |  |   |                                    |    |
| 3. Т         | The source of the compensation paid to me was:   |  |   |                                    |    |
|              | ■ Debtor □ Other (specify):  |  |   |                                    |    |
| 4. Т         | The source of compensation to be paid to me is:  |  |   |                                    |    |
|              | ■ Debtor □ Other (specify):  |  |   |                                    |    |
| 5.           | ■ I have not agreed to share the above-disclosed compe   | nsation with any other person  | unless they are mem   | bers and associates of my law firm | ı. |
| I            | ☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name   |  |   |                                    |    |
| <b>6</b> . ] | In return for the above-disclosed fee, I have agreed to ren  | der legal service for all aspec  | ts of the bankruptcy  | case, including:                   |    |
| t<br>c       | <ul> <li>Analysis of the debtor's financial situation, and rendered.</li> <li>Preparation and filing of any petition, schedules, statered.</li> <li>Representation of the debtor at the meeting of creditored. [Other provisions as needed]</li> <li>Negotiations with secured creditors to represent a reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on hour</li> </ul> | ment of affairs and plan which<br>is and confirmation hearing, a<br>educe to market value; ex<br>is as needed; preparation | n may be required;<br>nd any adjourned he<br>emption planning | arings thereof;                    |    |
| 7. I         | By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any discrete any other adversary proceeding.  |  |   | es, relief from stay actions o     | r  |
|              |  | CERTIFICATION  |   |                                    | _  |
|              | I certify that the foregoing is a complete statement of any ankruptcy proceeding.  | agreement or arrangement for   | payment to me for r   | epresentation of the debtor(s) in  |    |
| М            | larch 21, 2017   | /s/ David Cutler   |   |                                    |    |
|              | Pate   | David Cutler   |   |                                    |    |
|              |  | Signature of Attorn<br>Cutler & Associa  |   |                                    |    |
|              |  | 4131 Main Street   | •   |                                    |    |
|              |  | <b>Skokie, IL 60076</b>  |   |                                    |    |
|              |  | 847-673-8600 Fa  |   |                                    |    |
|              |  | david@cutlerltd.  Name of law firm   | com   |                                    |    |
|              |  | riame oj iaw jirm  |   |                                    |    |

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CUTLER & ASSOCIATES, LTD.

ATTORNEYS AT LAW 4131 MAIN STREET SKOKIE, ILLINOIS 60076

TELEPHONE (847) 673-8600 FAX (847) 673-8636

March 8, 2017

#### **VIA EMAIL ONLY**

Dear Jeffrey Homan:

We appreciate the opportunity to help you resolve your financial situation. After reviewing your finances, I agree with you that filing for bankruptcy under Chapter 7 is the best solution.

This letter will serve as an engagement agreement that will establish the terms of our relationship. When you sign it, it will become a contract between us.

In passing the Bankruptcy Abuse Prevention and Consumer Protection Act of 2005, the Congress imposed strict requirements upon attorneys representing debtors, requiring them to specify what duties they will perform and to make certain representations to clients. Those specific duties and representations are set out in the representation agreement.

Please read this agreement carefully and be sure you understand it. If you have any questions, you should consult with me before signing. Once you are satisfied with the agreement, please sign and return a copy to me.

Following are the specifics of our proposed representation, we will:

- 1. Meet with you to discuss your financial situation and possible solutions;
- 2. Provide the section 342(b)(1) notice, which sets out the purpose, benefits, and costs of filing under Chapters 7, 11, 12 or 13; the types of services available from credit counseling agencies; and the penalties of committing certain bankruptcy crimes, and will explain the notice to you;
- 3. Prepare the necessary bankruptcy petition, schedules, statement of affairs, and other documents, and review and file the bankruptcy case under the chapter you select;
  - Prepare for and accompany you to the section 341 first meeting of creditors;
- 5. Assist in the amendments to the papers filed and the production of such documents as the trustee requests;
  - 6. Assist you in the execution of reaffirmation agreements that are in your best interest.

For this work, we will charge you the following:

A fee of \$590 to file a chapter 7 bankruptcy petition for you, which may not be a complete filing. If you elect this option, we will ask you to sign a separate agreement after your petition is filed which will require payments of \$1,250 in order for us to perform all additional work which will enable you to obtain a discharge or your debts. You understand, however, that if you do not retain us to perform the additional work, we will not be obligated to do any other work for you and we may withdraw from your case and/or

Case 17-08954 Filed 03/21/17 Entered 03/21/17 18:45:44 Desc Main Doc 1 Document Page 49 of 56 your case may be dismissed.

As a separate document, but included as part of this representation agreement, we are giving you notice of "Important Information About Bankruptcy Assistance Services from an Attorney" as required by section 527 of the Bankruptcy Reform Act. See Exhibit A. and How to Provide All Information Required by Section 521.

You agree to furnish all information necessary to enable us to complete the papers that will be filed in your case and that such information will be complete, accurate, and truthful.

This document represents the complete agreement between the parties and may not be modified or replaced except by a subsequent written agreement executed by the parties. You also acknowledge that you were provided Exhibit B that is also fully incorporated herein.

This representation agreement shall be void if not executed by the parties within five (5) business days after the first date on which the agency provides any bankruptcy assistance services.

You acknowledge that we can not 100% guarantee you that you will receive a discharge in a Chapter 7. Your petition will be reviewed by the trustee, bankruptcy court, US Trustee and potential creditors. They have the right to object to the petition. However, we strive to ensure that all petitions are prepared and reviewed so that any potential issues are resolved prior to filing to give you the best possible chance of a discharge. You also understand that most taxes, student loans and other governmental obligations will not be discharged in your bankruptcy.

The client understands that all funds that client is paying to Cutler & Associates, are to be considered an advance payment which is part of this payment retainer agreement and shall immediately become the property of Cutler & Associates, Ltd. This advance payment is made in exchange for a promise by Cutler & Associates, Ltd., to provide said legal services listed in this retainer agreement. Said advance payment funds will be deposited into the general business account owned by Cutler & Associates, Ltd., and will be used for any and all general expenses of Cutler & Associates, Ltd. The undersigned also understands that it is the client's choice to have said retainer deposited in Cutler & Associates, Ltd.'s IOLTA attorney bank account and shall remain the undersigned's property as security for any future services. However, if the undersigned chooses this option, he or she understands that Cutler & Associates, Ltd. does not represent the undersigned due to the fact that the legal work and creation of a bankruptcy case requires various tasks and expenses for the attorneys and employees of Cutler & Associates, Ltd., some of which requires legal advice, secretarial work and expenses required for the creation and processing of said Bankruptcy case and services. Finally, the undersigned understands that the benefit that the undersigned is gaining for payment of said advanced retainer payment is a promise of Cutler & Associates, Ltd. to perform any and all work reasonably necessary to represent client's Bankruptcy interests, notwithstanding any extraordinary circumstances regarding the undersigned's Bankruptcy case.

Sincerely and agreed:

Cutler & Associates, Ltd.

A Debt Relief Agency

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### EXHIBIT A Debt Relief Agency Disclosures to an Assisted Person

Section 527 of the Bankruptcy Code requires a Debt Relief Agency to provide an assisted person with the following:

A copy of the notice prepared by the clerk of the Bankruptcy Court, in accordance with the requirements of §342(b), which is attached hereto and which contains:

- (1) a brief description of:
  - (A) Chapters 7, 13, 12, and 13 and the general purpose, benefits, and costs of proceeding under each of those chapters; and
  - (B) the types of services available from credit counseling agencies; and
- (2) statements specifying that:
  - (A) a person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury in connection with a case under this title shall be subject to fine, imprisonment, or both; and
  - (B) all information supplied by a debtor in connection with a case under this title is subject to examination by the Attorney General.
- 2. The following disclosures are required by §527(a)(2), which advises an assisted person that:
  - (A) all information that the assisted person is required to provide with a petition and thereafter during a case under this title is required to be complete, accurate, and truthful.
  - (B) all assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in § 506 must be stated in those documents where requested after reasonable inquiry to establish such value;
  - (C) current monthly income, the amounts specified in section 707(b)(2), and, in a case under Chapter 13 of this title, disposable income (determined in accordance with § 707(b)(2)) are required to be stated after reasonable inquiry; and
  - (D) information that an assisted person provides during his or her case may be audited pursuant to this title, and failure to provide such information may result in dismissal of the case under this title or other sanction, including a criminal sanction.

If you have any questions about any of these disclosures, we will be happy to provide further explanation. We also call your attention to Exhibits A and B attached to the Representation and made a part thereof.

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Separate Disclosure Required by Section 527 of the Bankruptcy Code as Amended

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY

(Note: This form is mandated by statute. It may or may not correctly explain the law.)

If you decide to seek bankruptcy relief, you can represent yourself; you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. The law requires an attorney or bankruptcy petition preparer to give you a written contract specifying what the attorney or bankruptcy petition preparer will do for you and how much it will cost. Ask to see the contract before you hire anyone.

The following information explains what must be done in a routine bankruptcy case to help you evaluate how much services you need. Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and decide which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents (Petition, Schedules, Statement of Financial Affairs, and in some cases a Statement of Intention) must be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you must attend the required first meeting of creditors, where you may be questioned by a court official called a "trustee" and by creditors.

If you choose to file a Chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a Chapter 13 case, in which you repay your creditors what you can afford over 3 to 5 years, you may also want help preparing your Chapter 13 plan and with the confirmation hearing on your plan, which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than Chapter 7 or Chapter 13, you should consult someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only lawyers, not bankruptcy petition preparers, can give you legal advice.

#### **EXHIBIT B**

Information to the Assisted Person (Debtor) on How to Provide All Information Required by Section 521

Section 521 of the Code sets out the Debtor's duties related to the filing of a bankruptcy case. A copy of the section is attached to this writing.

As you fill out these schedules and statement of affairs, you should keep the following in mind.

Completing the income and expense pages accurately and completely is critical.

- (a) To compile your income, refer to recent pay stubs and last year's income tax returns. Accounting for overtime, investment dividends, and other earnings is necessary.
- (b) People usually pay cash for many items, such as groceries. Review your monthly expense payments and make a best estimate on cash expenditures. If you pay insurance annually, calculate the monthly cost. Attached are IRS expense allowances for the area in which you live. If your expenses exceed these, we will have to review them and perhaps make adjustments.
- (c) When you value property you own, consider prices in the neighborhood for housing, in newspapers and car lots for automobiles, and what you would pay for furniture and clothes at a business selling such goods.
- (d) If you have an item of special value, an appraisal may be necessary.
- (e) When listing creditors, collect current bills and use that information for mailing addresses and balances due.
- (f) Under the law of this state, or federal bankruptcy law, certain property may be exempt and may be retained. Attached is a copy of the state list of exemptions and also a list of property that may be exempt under federal law. Neither list is all-inclusive. If a seller has a lien on exempt property, the lien may be avoidable or you may have to pay for the property in order to keep it. After you have prepared these lists, we can review them and decide what property qualifies as exempt.

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#### EXHIBIT C

# IMPORTANT NOTES PLEASE READ EACH CAREFULLY. By initialing you acknowledge that you read and understood each of the following

|                                       | Important Information  |
|---------------------------------------|--|
|                                       | Within 14 days of filing your core you are required to complete and file an |
|                                       | Within 14 days of filing your case you are required to complete and file a certificate showing that you have completed a debtor education class. If you do not, you will not receive a discharge. It is  |
|                                       | your responsibility to complete the class and we will not remind you.  |
|                                       | We can add creditors to your petition within a reasonable time after filing. However, there is a fee   |
|                                       | of \$100 which includes a \$20 court cost that must be reid minuted after Hilling. However, there is a fee   |
|                                       | of \$100 which includes a \$30 court cost that must be paid prior to us amending your petition. You  |
|                                       | are fully responsible for providing all creditors to us and if you wish for us to amend your petition  |
|                                       | prior to discharge you must provide us a list of the missing creditors and the \$100 along with any  |
|                                       | other documents we require, no later than <u>30 days prior</u> to discharge. We will not remind you of the deadline.   |
|                                       |  |
|                                       | If at any time you need a copy of your notice of filing or discharge letter there will be a charge of  |
| ·                                     | \$100 that must be paid prior to the paper work being given to you.  |
|                                       | If you fail to attend your first 341 meeting for any reason and it is continued. You will pay our  |
| <del></del>                           | firm an additional \$300 to attend the continued 341 meeting.  |
|                                       | Any other potential services, such as defense of a complaint to determine dischargability of a debt  |
| <u> </u>                              | or of a United States Trustee motion to convert this case or dismiss it as an abusive filing, are not  |
| <del></del>                           | included and will be provided only through a separate representation agreement.  |
|                                       | If you have property secured by a loan (i.e. vehicle or real estate) and you wish to continue with   |
|                                       | the pre-filing payments, it is important for you to call your lender, after filing bankruptcy and ask  |
|                                       | them to send us a "reaffirmation agreement". The reaffirmation agreement is your agreement to  |
|                                       | keep paying for the property after your bankruptcy case is over. If you execute a reaffirmation  |
| . ,                                   | agreement and it is filed with the court you will then be fully obligated to repay the loan. It is your  |
|                                       | responsibility to ensure that you read the reaffirmation carefully and understand its terms. In  |
|                                       | addition, you must make sure the bank files it with the bankruptcy court. We will only complete  |
|                                       | necessary portions of the reaffirmation agreement, it is your responsibility to make sure it is  |
|                                       | executed and filed by the bank. This is not a recommendation to reaffirm mortgage loans  |
|                                       | It is very important for you to inform us of any credit card purchases within the last six months for  |
|                                       | non-essential items and cash advances. I consider food, gas, medical and other such purchases to   |
|                                       | be essential. Any non-essential purchases in excess of \$500 should be specifically discussed with   |
|                                       | me so that I can best serve your interests.  |
|                                       | You must notify me of any normants made to a file of a contract of the state of the |
|                                       | You must notify me of any payments made to a friend or family member within 1yr of filing the bankruptcy petition that were made to repay a debt owed to them.   |
|                                       |  |
|                                       | It is your responsibility to make sure we have a full list of your creditors and their correct   |
|                                       | bankruptcy mailing address.  |
|                                       | You have told us of all real estate you owned in the last 5 years. Regardless of its current   |
|                                       | ownership or title status and your petition discloses any judgements you may have against you.   |
|                                       | Von must file your said: 00 1  |
|                                       | You must file your case within 90 days of executing this agreement or we reserve the right to close  |
|                                       | your case. See below for refund policy.  |
|                                       | If you pay our fee in full and then decide to not proceed, we are entitled to keep no less than  |
|                                       | 3/30 for work completed on your bankruntey nefition prior to your decision to not proceed  |
|                                       | we reserve the right to make the final determination on how much money to refund to you  |
| 3                                     | in you pay a down payment we will not return your money as if will be credited against the   |
| · · · · · · · · · · · · · · · · · · · | meeting time you spent with our attorney.  |
| N                                     |  |

## **United States Bankruptcy Court Northern District of Illinois**

|       |  | Tion then District of Hillions                            |                     |                          |
|-------|--|---|---------------------|--------------------------|
| In re | Jeffrey J Homan                            |   | Case No.            |                          |
|       |  | Debtor(s)   | Chapter             | 7                        |
|       | VE   | ERIFICATION OF CREDITOR M                                 | <b>IATRIX</b>       |                          |
|       |  | Number of   | Creditors:          | 11                       |
|       | The above-named Debtor(s) (our) knowledge. | ) hereby verifies that the list of credi                  | tors is true and co | orrect to the best of my |
| Date: | March 21, 2017                             | /s/ Jeffrey J Homan  Jeffrey J Homan  Signature of Debtor |                     |                          |

Ally Financial Po Box 380901 Bloomington, MN 55438

Amer Gen Fin Springleaf Financial/Attn: Bankruptcy De Po Box 3251 Evansville, IN 47731

Belden Jewelers/Sterling Jewelers, Inc Attn: Bankruptcy Po Box 1799 Akron, OH 44309

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Po Box 15298 Wilmington, DE 19850

Discover Financial Po Box 3025 New Albany, OH 43054

Hsbc Bank Usa, Na Po Box 2013 Buffalo, NY 14240

Lending Club Corp 71 Stevenson St Suite 300 San Francisco, CA 94105

Northwest Collectors 3601 Algonquin Rd Ste 232 Rolling Meadows, IL 60008

Personal Finance/p312 1022 S. Mclean Blvd Elgin, IL 60123 Ruth Kinast 46W360 Higgins Rd South Elgin, IL 60177